

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

ADDRESS (number and street) 320 FIRST STREET SE
 Check if different than previously reported. (ACC)
WASHINGTON DC 20003

2. **FEC IDENTIFICATION NUMBER** C00075820
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on 11 02 2010 in the State of _____

5. Covering Period 10 14 2010 through 11 22 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Keith A. Davis
Signature of Treasurer Electronically Filed by Keith A. Davis Date 12 02 2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Report Covering the Period: From:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		2674277.42
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	11290349.59									
(c) Total Receipts (from Line 19)	24670711.22	95709792.84								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	35961060.81	98384070.26								
7. Total Disbursements (from Line 31)	31312998.61	93736008.06								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	4648062.20	4648062.20								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	12000000.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Report Covering the Period: From:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	3189252.68	24057422.07
(ii) Unitemized	1058030.91	21244277.98
(iii) TOTAL (add Lines 11(a)(i) and (ii)	4247283.59	45301700.05
(b) Political Party Committees	10000.00	10000.00
(c) Other Political Committees (such as PACs)	5960398.12	32611277.08
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	10217681.71	77922977.13
12. Transfers From Affiliated/Other Party Committees	2051082.60	4690314.92
13. All Loans Received	12000000.00	12000000.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	41446.91	132450.79
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	360500.00	964050.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	24670711.22	95709792.84
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	24670711.22	95709792.84

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	3940553.10	38765252.16
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	3940553.10	38765252.16
22. Transfers to Affiliated/Other Party Committees.....	1337500.00	3536293.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	100000.00	576042.78
24. Independent Expenditure (use Schedule E)	23781647.45	44525486.29
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	1929521.75	6038993.25
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	1136.00	39255.27
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	5000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	1136.00	44255.27
29. Other Disbursements.....	222640.31	249685.31
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	31312998.61	93736008.06
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	31312998.61	93736008.06

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	10217681.71	77922977.13
34. Total Contribution Refunds (from Line 28(d))	1136.00	44255.27
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10216545.71	77878721.86
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	3940553.10	38765252.16
37. Offsets to Operating Expenditures (from Line 15, page 3)	41446.91	132450.79
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3899106.19	38632801.37

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ROGER P. NOBER

Mailing Address 3301 MOSS HOLLOW

City State Zip Code
FORT WORTH TX 76109-2413

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BNSF CO, LAWYER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13961181

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
ROSA S. ABALO

Mailing Address 4520 SW 100TH. AVE

City State Zip Code
MIAMI FL 33165-5725

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 281.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939277

Amount of Each Receipt this Period

40.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
ROSA S. ABALO

Mailing Address 4520 SW 100TH. AVE

City State Zip Code
MIAMI FL 33165-5725

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 281.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957434

Amount of Each Receipt this Period

40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5080.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. MOHAMMAD J. ABBASI

Mailing Address 2690 S 700 E APT 206

City State Zip Code
SALT LAKE CITY UT 84106

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954568

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. MOHAMMAD J. ABBASI

Mailing Address 2690 S 700 E APT 206

City State Zip Code
SALT LAKE CITY UT 84106

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13969284

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DAVID ABBOTT

Mailing Address 19 FAIRWAY DRIVE

City State Zip Code
QUARRYVILLE PA 17566-9292

FEC ID number of contributing federal political committee. **C**

Name of Employer
SELF-EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

PHYSICIAN

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943801

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

300.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
JOHN S. ABBOTT

Mailing Address 1411 N 13TH. ST.

City State Zip Code
CAMBRIDGE OH 43725-1019

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 401.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936045

Amount of Each Receipt this Period

1.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. PAUL ABBOTT

Mailing Address 2809 45TH COURT SE

City State Zip Code
OLYMPIA WA 98501-4815

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 235.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13972859

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
EDWIN G. ABRAHAMS

Mailing Address 2623 W SALE RD

City State Zip Code
LAKE CHARLES LA 70605-2215

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 330.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952900

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

101.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MAGID ABRAHAM

Mailing Address 1018 MURPHY DRIVE

City State Zip Code
GREAT FALLS VA 22066-1935

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CNSCORE EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13943029

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. KENNETH ABRAMOWITZ

Mailing Address P.O. BOX 958

City State Zip Code
SOUTHPORT CT 06890-0958

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
THE CARLYLE GROUP HEALTH CARE ANALYST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13965478

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. PATRICIA E. ABRAMSON

Mailing Address 5 GOODMAN LN

City State Zip Code
WAYLAND MA 01778-3501

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BENLTEY UNIVERSITY EDUCATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951218

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **3550.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 10 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CLAIR W. ABTS

Mailing Address 1657 HUNTINGTON DR. APT. 125

City State Zip Code
DUARTE CA 91010-2505

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1071.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930647

Amount of Each Receipt this Period
35.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. ANGELINA ACERRA

Mailing Address 6822 60TH RD.

City State Zip Code
MASPETH NY 11378-2542

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 325.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955110

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GARY ACERRA

Mailing Address 700 VICTORY BLVD APT 10M

City State Zip Code
STATEN ISLAND NY 10301-3508

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NYS COURTA NYS COURT OFFICER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 241.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956188

Amount of Each Receipt this Period
6.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 81.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 11 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. IRWIN ACKERMAN

Mailing Address 93 SHARON RD

City State Zip Code
LAKEVILLE CT 06039-2111

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ACKLININ ASSOCIATES LLP REAL ESTATE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 20000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929772

Amount of Each Receipt this Period
20000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RICHARD M. ACKER

Mailing Address 1606 MONTCLIFF DR.

City State Zip Code
DOTHAN AL 36303-2023

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935500

Amount of Each Receipt this Period
101.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM L. ACKLEY

Mailing Address 13506 BALCREST DR

City State Zip Code
HOUSTON TX 77070-3906

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940979

Amount of Each Receipt this Period
150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 20251.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JUDY ADAIR

Mailing Address 1006 ANTLER DR.

City State Zip Code
SUMMIT MS 39666-6015

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MCCOMB PRINTING, INC. COMMERCIAL PRINTING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13960710

Amount of Each Receipt this Period
85.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MICHAEL A. ADAMOWICZ

Mailing Address 223 W WASHINGTON BLVD

City State Zip Code
LOMBARD IL 60148-2546

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 831.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13946560

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL A. ADAMOWICZ

Mailing Address 223 W WASHINGTON BLVD

City State Zip Code
LOMBARD IL 60148-2546

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 831.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13954514

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 135.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL A. ADAMOWICZ

Mailing Address 223 W WASHINGTON BLVD

City State Zip Code
LOMBARD IL 60148-2546

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 831.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 19 / 2010

Transaction ID: SA11.13972082

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DARRELL W. ADAMS

Mailing Address 770 ORCHID HILL LN

City State Zip Code
ARGYLE TX 76226-4524

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 285.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 26 / 2010

Transaction ID: SA11.13951448

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. DONNA M. ADAMS

Mailing Address 928 E 100 N

City State Zip Code
BRIGHAM CITY UT 84302-2734

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 276.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2010

Transaction ID: SA11.13945113

Amount of Each Receipt this Period
20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 145.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
GARY ADAMS

Mailing Address 3420-H W. MACARTHUR BLVD

City State Zip Code
SANTA ANA CA 92704-6853

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PROPERTY MANAGEMENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 4400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	1	0

Transaction ID: SA11.13938808

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GARY ADAMS

Mailing Address 3420-H W. MACARTHUR BLVD

City State Zip Code
SANTA ANA CA 92704-6853

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PROPERTY MANAGEMENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 4400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	1	0

Transaction ID: SA11.13938809

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GARY ADAMS

Mailing Address 3420-H W. MACARTHUR BLVD

City State Zip Code
SANTA ANA CA 92704-6853

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PROPERTY MANAGEMENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 4400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13951082

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
GARY ADAMS

Mailing Address 3420-H W. MACARTHUR BLVD

City State Zip Code
SANTA ANA CA 92704-6853

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PROPERTY MANAGEMENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 4400.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13958210

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LESTER D. ADAMS

Mailing Address 4915 33RD AVE CT E

City State Zip Code
TACOMA WA 98443-1580

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 310.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949780

Amount of Each Receipt this Period
60.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. MARY U. ADAMS

Mailing Address 5708 MAGGIE RUN LN

City State Zip Code
FUQUAY VARINA NC 27526-7346

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 370.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931649

Amount of Each Receipt this Period
110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 420.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. THOMAS H. ADAMS

Mailing Address 1054 NEPTUNE AVE

City State Zip Code
ENCINITAS CA 92024-1424

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
IRIS MOLECULAR DIAGNOSTICS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955903

Amount of Each Receipt this Period
210.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. WALTRAUD H. ADAMS

Mailing Address 10926 MULBERRY ST

City State Zip Code
SEBASTIAN FL 32958-8112

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918480

Amount of Each Receipt this Period
160.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. MARY ELIZABETH ADDERLY

Mailing Address 2456 CALLE DEL ORO

City State Zip Code
LA JOLLA CA 92037-2003

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961237

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 2870.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MICHAEL ADDY

Mailing Address 6326 VANDERBILT STREET

City HOUSTON State TX Zip Code 77005-3416

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 19 / 2010

Transaction ID: SA11.13932242

Amount of Each Receipt this Period 500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RICHARD L. ADEE

Mailing Address P.O. BOX 368

City BRUCE State SD Zip Code 57220-0368

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation BOOKKEEPER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2010

Transaction ID: SA11.13965623

Amount of Each Receipt this Period 250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MARTIN J. ADELMAN

Mailing Address 29820 WOODLAND DR.

City SOUTHFIELD State MI Zip Code 48034-1339

FEC ID number of contributing federal political committee. **C**

Name of Employer GEORGE WASHINGTON UNIVERSITY Occupation TEACHER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 21 / 2010

Transaction ID: SA11.13946378

Amount of Each Receipt this Period 100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 850.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
SHELLEY F. ADELSON

Mailing Address 20 SANKATY CIRCLE

City Henderson State NV Zip Code 89052-6670

FEC ID number of contributing federal political committee. **C**

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt: 10 / 18 / 2010

Transaction ID: SA11.13942472

Amount of Each Receipt this Period: 30400.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. HARRY ADJMI

Mailing Address 518 AVENUE T

City Brooklyn State NY Zip Code 11223-4043

FEC ID number of contributing federal political committee. **C**

Name of Employer: ONE STEP UP, LTD Occupation: PRESIDENT/OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 625.00

Date of Receipt: 10 / 25 / 2010

Transaction ID: SA11.13953346

Amount of Each Receipt this Period: 375.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. BARBARA F. ADRIC

Mailing Address 2767 E ATSINA DR

City Sierra Vista State AZ Zip Code 85650-8607

FEC ID number of contributing federal political committee. **C**

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 387.00

Date of Receipt: 10 / 26 / 2010

Transaction ID: SA11.13956767

Amount of Each Receipt this Period: 50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 30825.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. SANTENDRA AGRAWAL

Mailing Address 3908 AUTUMN DR

City State Zip Code
HURON OH 44839-2104

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
301.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13934724

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. SANTENDRA AGRAWAL

Mailing Address 3908 AUTUMN DR

City State Zip Code
HURON OH 44839-2104

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
301.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13934855

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. SANTENDRA AGRAWAL

Mailing Address 3908 AUTUMN DR

City State Zip Code
HURON OH 44839-2104

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
301.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13936283

Amount of Each Receipt this Period
1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **101.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. SANJIV AHUJA

Mailing Address 22 EATON PLACE
FLAT 1

City State Zip Code
LONDON, ENGLAND SW

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LIGHT SQUARED CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13961178

Amount of Each Receipt this Period
30400.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. PATRICIA A. AINLEY

Mailing Address 6020 MELVIN AVE

City State Zip Code
TARZANA CA 91356-1024

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
A & M MANAGEMENT LLC REAL ESTATE BROKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2105.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929762

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. PATRICIA A. AINLEY

Mailing Address 6020 MELVIN AVE

City State Zip Code
TARZANA CA 91356-1024

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
A & M MANAGEMENT LLC REAL ESTATE BROKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2105.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13944733

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 30750.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. PATRICIA A. AINLEY
 Mailing Address 6020 MELVIN AVE
 City State Zip Code
 TARZANA CA 91356-1024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 A & M MANAGEMENT LLC REAL ESTATE BROKER
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2105.00
 Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 2 6 / 2 0 1 0
Transaction ID: SA11.13951671
 Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. PATRICIA A. AINLEY
 Mailing Address 6020 MELVIN AVE
 City State Zip Code
 TARZANA CA 91356-1024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 A & M MANAGEMENT LLC REAL ESTATE BROKER
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2105.00
 Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 2 8 / 2 0 1 0
Transaction ID: SA11.13959013
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. PATRICIA A. AINLEY
 Mailing Address 6020 MELVIN AVE
 City State Zip Code
 TARZANA CA 91356-1024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 A & M MANAGEMENT LLC REAL ESTATE BROKER
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2105.00
 Date of Receipt
 M M / D D / Y Y Y Y
 1 1 / 0 3 / 2 0 1 0
Transaction ID: SA11.13964503
 Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 200.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. PATRICIA A. AINLEY

Mailing Address 6020 MELVIN AVE

City State Zip Code
TARZANA CA 91356-1024

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
A & M MANAGEMENT LLC REAL ESTATE BROKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2105.00

Date of Receipt
MM / DD / YYYY
11 / 09 / 2010

Transaction ID: SA11.13967180

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
TED E. AINSBAUGH

Mailing Address 1302 24TH ST. W. #329

City State Zip Code
BILLINGS MT 59102-3861

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
11 / 18 / 2010

Transaction ID: SA11.13971449

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. KATHERINE D. AINSLIE

Mailing Address P.O. BOX 589

City State Zip Code
INGRAM TX 78025-0589

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED INVESTMENTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 459.00

Date of Receipt
MM / DD / YYYY
10 / 27 / 2010

Transaction ID: SA11.13955776

Amount of Each Receipt this Period
80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 230.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MAX T. AINSWORTH

Mailing Address 771 HIGHPOINT DRIVE

City State Zip Code
BYRAM MS 39272-9387

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 1 0

Transaction ID: SA11.13966471

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
HAROLD L. AIRINGTON

Mailing Address 70 WESTBAY DR

City State Zip Code
KILMARNOCK VA 22482-3540

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13969291

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT C. AITKEN

Mailing Address 15619 GETTYSBURG DR.

City State Zip Code
TOMBALL TX 77377-8608

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
OGME INC SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949687

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 175.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DR. FADI ALAMEDDINE

Mailing Address 14103 RIVER FOREST DRIVE

City State Zip Code
HOUSTON TX 77079-6808

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13958244

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
LYNN ALAXANDER

Mailing Address 3120 LEXINGTON RD.

City State Zip Code
NICHOLASVILLE KY 40356-9797

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943170

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ROBERT I. ALBERT

Mailing Address 9588 TERRACE PL. APT. 11
APARTMENT 11

City State Zip Code
DES PLAINES IL 60016-3963

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 325.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 1 0

Transaction ID: SA11.13972133

Amount of Each Receipt this Period
55.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5255.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ROBERT I. ALBERT

Mailing Address 9588 TERRACE PL. APT. 11
APARTMENT 11

City State Zip Code
DES PLAINES IL 60016-3963

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 19 / 2010

Transaction ID: SA11.13972147

Amount of Each Receipt this Period

55.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
CHARLES ALBRIGHT

Mailing Address 2911 W LANE DR.

City State Zip Code
HOUSTON TX 77027-4919

FEC ID number of contributing federal political committee. **C**

Name of Employer
MORGAN STANLEY SMITH BARN-
EY

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

STOCKBROKER

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 18 / 2010

Transaction ID: SA11.13935670

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. ROBERTA ALCORN

Mailing Address 22410 SUMNER BUCKLEY HWY E.

City State Zip Code
BUCKLEY WA 98321-9269

FEC ID number of contributing federal political committee. **C**

Name of Employer
HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

HOMEMAKER

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 28 / 2010

Transaction ID: SA11.13959021

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

255.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. KATHERINE H. ALDEN

Mailing Address 440 MANZANITA WAY

City State Zip Code
WOODSIDE CA 94062-1215

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WOODSIDE HOTELS & RESORTS OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11A.13977523

Amount of Each Receipt this Period
2000.00

IN-KIND CONTRIBUTION

IN-KIND: FOOD AND BEVERAGE

B.

Full Name (Last, First, Middle Initial)
MR. ARTHUR N. ALDERSON

Mailing Address 6 CANTERBURY PARK

City State Zip Code
BENTONVILLE AR 72712-4088

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13972723

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. MURRAY Y. ALDERFER

Mailing Address 42 CRESCENT CIRCLE

City State Zip Code
HARLEYSVILLE PA 19438-1070

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950718

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 2525.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CHARLES F. ALEXANDER

Mailing Address 111 N POMPANO BEACH BLVD

City State Zip Code
POMPANO BEACH FL 33062-5712

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13972830

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CHARLES H. ALEXANDER

Mailing Address 1025 W LINDO AVE

City State Zip Code
CHICO CA 95926-2018

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 325.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959965

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID L. ALEXANDER

Mailing Address 502 S 7TH ST

City State Zip Code
LAFAYETTE IN 47901-1716

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SEATTLE MARINERS BASEBALL SCOUT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 560.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954975

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 175.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. EARL E. ALEXANDER

Mailing Address 204 WESTGATE DR

City State Zip Code
NAPA CA 94558-1236

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 325.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951498

Amount of Each Receipt this Period
75.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. ELIZABETH ALEXANDER

Mailing Address 437 W 44TH ST APT BW
BSMT BW

City State Zip Code
NEW YORK NY 10036-4452

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RANDOM HOUSE ART DIRECTOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 215.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931572

Amount of Each Receipt this Period
30.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. JOHN ALEXANDER

Mailing Address P.O. BOX 288

City State Zip Code
CAYUCOS CA 93430-0288

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 205.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950550

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 205.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. MERVIN E. ALEXANDER

Mailing Address 3409 ZUNI ST.

City State Zip Code
DENVER CO 80211-3359

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 215.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940049

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MERVIN E. ALEXANDER

Mailing Address 3409 ZUNI ST.

City State Zip Code
DENVER CO 80211-3359

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 215.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940232

Amount of Each Receipt this Period

30.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MERVIN E. ALEXANDER

Mailing Address 3409 ZUNI ST.

City State Zip Code
DENVER CO 80211-3359

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 215.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944317

Amount of Each Receipt this Period

30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

85.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WALTER ALEXANDER

Mailing Address P.O. BOX 831

City State Zip Code
AURORA IL 60507-0831

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ALEXANDER LUMBER CO BUSINESS MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: 11 / 01 / 2010
Transaction ID: SA11.13963684
Amount of Each Receipt this Period: 900.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. MARINA M. ALFISHER

Mailing Address 52 NARDELL RD

City State Zip Code
NEWTON CENTER MA 02459-2821

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13951395
Amount of Each Receipt this Period: 110.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MICHAEL ALFRED

Mailing Address 90 HIGHLAND AVE

City State Zip Code
WORTHINGTON OH 43085-2665

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TFS LOAN OFFICER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.12

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13950994
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1060.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ROBERT B. ALLBERT

Mailing Address 229 PINEY GROVE PT

City State Zip Code
NEW LONDON NC 28127-8668

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	1	0

Transaction ID: SA11.13939336

Amount of Each Receipt this Period
150.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. ALETHE M. ALLEN

Mailing Address 4629 GOLDEN APPLES TRL

City State Zip Code
PORT ORANGE FL 32129-5202

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	5	/	2	0	1	0

Transaction ID: SA11.13928066

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID DWIGHT ALLEN

Mailing Address 12645 CREEKVIEW DR, UNIT #122

City State Zip Code
SAN DIEGO CA 92128-5651

FEC ID number of contributing federal political committee. **C**

Name of Employer GROSSMONT UNION HS
Occupation TEACHER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	1	0

Transaction ID: SA11.13968031

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **275.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. EARL ALLEN

Mailing Address 201 BEL AIRE DR

City State Zip Code
CLARKESVILLE GA 30523-4101

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929221

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. FORREST J. ALLEN

Mailing Address 22 SANDINGHAM WAY

City State Zip Code
THE WOODLANDS TX 77384-4490

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PETR. ENGR.

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 245.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941110

Amount of Each Receipt this Period

105.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. PHIL R. ALLEN

Mailing Address 9723 MAPLEHILL DR

City State Zip Code
DALLAS TX 75238-2605

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 244.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946525

Amount of Each Receipt this Period

39.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

194.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) RICHARD ALLEN		Date of Receipt
	Mailing Address 1201 3RD AVE STE 5200		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 10 / 19 / 2010
	City	State	Zip Code
	SEATTLE	WA	98101-3041
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13940674
Name of Employer COZEN O'CONNOR		Occupation LAWYER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	<input type="text"/> 150.00
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MR. TERRY W. ALLEN		Date of Receipt
	Mailing Address 1577 COUNTY LINE ROAD		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 11 / 02 / 2010
	City	State	Zip Code
	SHELBYVILLE	TN	37160-8028
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13964830
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation FARMER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 360.00	<input type="text"/> 160.00
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MR. WHITELAW R. ALLEN, JR.		Date of Receipt
	Mailing Address 660 W CALIFORNIA BLVD		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 10 / 20 / 2010
	City	State	Zip Code
	PASADENA	CA	91105-2415
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13938610
Name of Employer MASSACHUSETTS MUTUAL LIFE INSURANCE		Occupation INSURANCE SALES	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	<input type="text"/> 110.00
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 420.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES R. ALLEY

Mailing Address 12713 SE RANSON RD.

City State Zip Code
LEES SUMMIT MO 64082-8900

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 221.00

Date of Receipt: 10 / 29 / 2010
Transaction ID: SA11.13961567
Amount of Each Receipt this Period: 1.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAMES R. ALLEY

Mailing Address 12713 SE RANSON RD.

City State Zip Code
LEES SUMMIT MO 64082-8900

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 221.00

Date of Receipt: 10 / 29 / 2010
Transaction ID: SA11.13961580
Amount of Each Receipt this Period: 60.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. CHERYL ALMALLAH

Mailing Address 105 CRANMOOR DR

City State Zip Code
TOMS RIVER NJ 08753-6805

FEC ID number of contributing federal political committee. **C**

Name of Employer MALLA Occupation PRACTICE ADMINISTRATOR\

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA11.13928276
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 111.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. FRANCES ALMAN

Mailing Address 257 HURDLE RD.

City PELAHATCHIE State MS Zip Code 39145-2878

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 11 / 22 / 2010
Transaction ID: SA11.13972840
Amount of Each Receipt this Period: 120.00
CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. BARBARA J. ALMOND

Mailing Address 235 PONDEROSA LN.

City ELIZABETH State CO Zip Code 80107-8526

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13940132
Amount of Each Receipt this Period: 20.00
CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ROBERT N. ALMON, SR.

Mailing Address 723 CANYON RD N

City TUSCALOOSA State AL Zip Code 35406-2101

FEC ID number of contributing federal political committee. **C**

Name of Employer ALMON ASSOCIATES INC
Occupation ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13944414
Amount of Each Receipt this Period: 220.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **360.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. CHRISTOPHER ALSTON

Mailing Address 8661 YOUNGER CREEK DR

City State Zip Code
SACRAMENTO CA 95828-1028

FEC ID number of contributing federal political committee. **C**

Name of Employer
CHRIS ALSTONS CHASSISWORKS INC.

Occupation
PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
850.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942990

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ROBERT ALTEMUS

Mailing Address 240 HOSPITAL DR.

City State Zip Code
BUFFALO TX 75831-7546

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
276.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958486

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. WILLIAM E. ALTERMATT

Mailing Address 137 OVERLOOK DR

City State Zip Code
LOVELAND OH 45140-6690

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928980

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RONNY G. ALTMAN

Mailing Address 2623 EAST 26TH PLACE

City State Zip Code
TULSA OK 74114-4305

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ALTMAN ENERGY INC ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13928414

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. MONNET ALVAREZ

Mailing Address 7129 DURANGO ST

City State Zip Code
LAS VEGAS NV 89120-3002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 465.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 1 0

Transaction ID: SA11.13968880

Amount of Each Receipt this Period
60.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PEDRO A. ALVAREZ

Mailing Address 5785 SW 118TH ST

City State Zip Code
CORAL GABLES FL 33156-5748

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945376

Amount of Each Receipt this Period
150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **710.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. MARGARET S. AMANN

Mailing Address 4022 S OCEAN BLVD

City State Zip Code
HIGHLAND BEACH FL 33487-3322

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 520.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	1	0

Transaction ID: SA11.13968876

Amount of Each Receipt this Period
110.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CRAIG AMATO

Mailing Address 1394 LUTCHER AVE

City State Zip Code
LUTCHER LA 70071-5402

FEC ID number of contributing federal political committee. **C**

Name of Employer AMALO'S REF. Occupation ELECTRICIAN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 320.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	1	0

Transaction ID: SA11.13949006

Amount of Each Receipt this Period
20.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. SYDNEY J. AMDERSON

Mailing Address 1 MONTEREY TERRACE

City State Zip Code
ORINDA CA 94563-3130

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 501.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	9	/	2	0	1	0

Transaction ID: SA11.13961596

Amount of Each Receipt this Period
101.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **231.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. JUAN R. AMELL

Mailing Address 17003 NORTHGATE FOREST CIRCLE

City State Zip Code
HOUSTON TX 77068-1422

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RED OAK CARDIOVASCULAR CE- NTER PHYSICIAN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1750.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928516

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. JUAN R. AMELL

Mailing Address 17003 NORTHGATE FOREST CIRCLE

City State Zip Code
HOUSTON TX 77068-1422

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RED OAK CARDIOVASCULAR CE- NTER PHYSICIAN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1750.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13969812

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. AGNES V. ANDERSON

Mailing Address 890 WIXFORD WAY

City State Zip Code
SACRAMENTO CA 95864-6139

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956732

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 600.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. AGNES V. ANDERSON

Mailing Address 890 WIXFORD WAY

City State Zip Code
SACRAMENTO CA 95864-6139

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2010

Transaction ID: SA11.13965612

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. ARLINGTON ANDERSON

Mailing Address 283 GERTRUDE AVE

City State Zip Code
FOND DU LAC WI 54935-2807

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1696.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13963110

Amount of Each Receipt this Period
165.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. ARLINGTON ANDERSON

Mailing Address 283 GERTRUDE AVE

City State Zip Code
FOND DU LAC WI 54935-2807

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1696.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13963194

Amount of Each Receipt this Period
125.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 390.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. ARLINGTON ANDERSON

Mailing Address 283 GERTRUDE AVE

City State Zip Code
FOND DU LAC WI 54935-2807

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1696.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963352

Amount of Each Receipt this Period

1.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. ARLINGTON ANDERSON

Mailing Address 283 GERTRUDE AVE

City State Zip Code
FOND DU LAC WI 54935-2807

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1696.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963717

Amount of Each Receipt this Period

85.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. ARLINGTON ANDERSON

Mailing Address 283 GERTRUDE AVE

City State Zip Code
FOND DU LAC WI 54935-2807

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1696.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13964614

Amount of Each Receipt this Period

165.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

251.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. BARBARA F. ANDERSON		Date of Receipt
	Mailing Address P.O. BOX 300		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	WHITEHALL	NY	12887-0300
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13939558
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 160.00
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MR. BRIAN ANDERSON		Date of Receipt
	Mailing Address 18660 BONNIE LANE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	BROOKFIELD	WI	53045-5435
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13962339
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation SALES	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 60.00
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MR. CHARLES M. ANDERSON		Date of Receipt
	Mailing Address P.O. BOX 5818		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	SANTA FE	NM	87502-5818
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13955316
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 270.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DAVE ANDERSON

Mailing Address 12807 10TH DR. SE

City State Zip Code
EVERETT WA 98208-6502

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 254.00

Date of Receipt MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13961157

Amount of Each Receipt this Period 39.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DONALD ANDERSON

Mailing Address 10020 LORETTA DR. NW

City State Zip Code
ALBUQUERQUE NM 87114-8806

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS BUSINESS OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt MM / DD / YYYY
10 / 28 / 2010

Transaction ID: SA11.13960458

Amount of Each Receipt this Period 750.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DONALD A. ANDERSON

Mailing Address 10350 IMPERIAL POINT DRIVE W
APARTMENT 2

City State Zip Code
LARGO FL 33774-4928

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
SELF-EMPLOYED ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13945925

Amount of Each Receipt this Period 50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 839.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. DOROTHY M. ANDERSON

Mailing Address 1055 W. JOPPA ROAD
UNIT 309

City State Zip Code
TOWSON MD 21204-3769

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
251.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935118

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. EUGENE R. ANDERSEN

Mailing Address 108 HUNTERS RUN DRIVE

City State Zip Code
AIKEN SC 29803-2739

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957013

Amount of Each Receipt this Period
10.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HARLAN ANDERSON

Mailing Address 8023 RANCHVIEW LN N

City State Zip Code
MAPLE GROVE MN 55311-2255

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959163

Amount of Each Receipt this Period
110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **170.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES K. ANDERSON

Mailing Address 903 CHAUTAUQUA AVE
P.O. BOX 1188

City NORMAN State OK Zip Code 73069-4610

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation OIL & GAS EXPLORATION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13940513
Amount of Each Receipt this Period 25.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. JANET M. ANDERSON

Mailing Address 11 RIDOUT RD

City SEVERNA PARK State MD Zip Code 21146-4627

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 21 / 2010
Transaction ID: SA11.13942579
Amount of Each Receipt this Period 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JIMMY L. ANDERSON

Mailing Address 7608 N 47TH AVE

City GLENDALE State AZ Zip Code 85301-1502

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13936918
Amount of Each Receipt this Period 75.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 200.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
JIMMY L. ANDERSON

Mailing Address 7608 N 47TH AVE

City State Zip Code
GLENDALE AZ 85301-1502

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957267

Amount of Each Receipt this Period

75.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JOHN G. ANDERSON

Mailing Address 7418 SPRING VILLAGE DR APT 219

City State Zip Code
SPRINGFIELD VA 22150-4933

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 371.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930206

Amount of Each Receipt this Period

26.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. JUANITA L. ANDERSON

Mailing Address 2011 TRIPPE STREET

City State Zip Code
RICHLAND WA 99354-2726

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 346.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939903

Amount of Each Receipt this Period

40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

141.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JUDITH D. ANDERSON
Mailing Address 255 E GREEN ST
City State Zip Code
JEFFERSON WI 53549-1775
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
ANDERSON ARCHITECTS, LLC ARCHITECT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 215.00
Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13956435
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LARRY W. ANDERSON
Mailing Address P.O. BOX 7726
City State Zip Code
HORSESHOE BAY TX 78657-7726
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
RETIRED RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13945706
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. LEONARD ANDERSON
Mailing Address 4600 DUKE ST APT 1316
City State Zip Code
ALEXANDRIA VA 22304-2510
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
RETIRED RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 245.00
Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13950335
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 200.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. LEONARD ANDERSON

Mailing Address 4600 DUKE ST APT 1316

City State Zip Code
ALEXANDRIA VA 22304-2510

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt: 11 / 04 / 2010
Transaction ID: SA11.13965665
Amount of Each Receipt this Period: 35.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LEONARD ANDERSON

Mailing Address 4600 DUKE ST APT 1316

City State Zip Code
ALEXANDRIA VA 22304-2510

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt: 11 / 10 / 2010
Transaction ID: SA11.13967642
Amount of Each Receipt this Period: 35.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. MARTA ANDERSEN

Mailing Address 2218 BURDETT AVE
APT 207

City State Zip Code
TROY NY 12180-2490

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13929419
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 110.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MARK J. ANDERSON

Mailing Address 705 ROSE STREET

City State Zip Code
ALEXANDRIA VA 22314-6251

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
KELLEY DRYE & WARREN INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
10 / 29 / 2010

Transaction ID: SA11.13959399

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RICHARD ANDERSON

Mailing Address 345 BRENTWOOD TERRACE

City State Zip Code
ATLANTA GA 30305-3206

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DELTA AIRLINES, INC. CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
MM / DD / YYYY
11 / 09 / 2010

Transaction ID: SA11.13967219

Amount of Each Receipt this Period
10000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MGY SGT. ROBERT ANDERSON

Mailing Address 2040 HILLMAN CIRCLE

City State Zip Code
ORANGE CA 92867-1817

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 387.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13945680

Amount of Each Receipt this Period
1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 10051.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MGY SGT. ROBERT ANDERSON

Mailing Address 2040 HILLMAN CIRCLE

City ORANGE State CA Zip Code 92867-1817

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 387.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13946834
 Amount of Each Receipt this Period: 60.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MGY SGT. ROBERT ANDERSON

Mailing Address 2040 HILLMAN CIRCLE

City ORANGE State CA Zip Code 92867-1817

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 387.00

Date of Receipt: 11 / 19 / 2010
Transaction ID: SA11.13972026
 Amount of Each Receipt this Period: 55.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. SHELLY L. ANDERSON

Mailing Address 17194 SEVEN SPRINGS WAY

City RIVERSIDE State CA Zip Code 92504-9426

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13929422
 Amount of Each Receipt this Period: 75.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 190.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
STEVEN ANDERSON

Mailing Address 105 RED FOX RUN

City State Zip Code
MONTGOMERY IL 60538-2914

FEC ID number of contributing federal political committee. **C**

Name of Employer CATAPILLER Occupation ENGINEER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 241.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13929747

Amount of Each Receipt this Period

60.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. THOMAS ANDERSON

Mailing Address 301 HOWELL ST.

City State Zip Code
SCHENECTADY NY 12303-3273

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 295.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13928998

Amount of Each Receipt this Period

55.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WALTER J. ANDERSON

Mailing Address 5 PALM MEADOWS COURT

City State Zip Code
SUGAR LAND TX 77479-2559

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	6	/	2	0	1	0

Transaction ID: SA11.13957935

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

365.00

TOTAL This Period (last page this line number only) ►

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**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM W. ANDERSON, JR.
 Mailing Address 1800 CLAIRMONT LAKE, UNIT 624
APT 624
 City DECATUR State GA Zip Code 30033-4041
 Date of Receipt 10 / 25 / 2010
Transaction ID: SA11.13953783
 Amount of Each Receipt this Period 1.00
CONTRIBUTION
 FEC ID number of contributing federal political committee. C
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 241.00

B. Full Name (Last, First, Middle Initial)
MRS. RITA ANDIS
 Mailing Address 5315 WIND POINT RD.
 City RACINE State WI Zip Code 53402-2322
 Date of Receipt 10 / 26 / 2010
Transaction ID: SA11.13951385
 Amount of Each Receipt this Period 100.00
CONTRIBUTION
 FEC ID number of contributing federal political committee. C
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

C. Full Name (Last, First, Middle Initial)
MR. NEAL D. ANDRASKO
 Mailing Address 10106 THERMON ST
 City HOUSTON State TX Zip Code 77075-3412
 Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13929023
 Amount of Each Receipt this Period 75.00
CONTRIBUTION
 FEC ID number of contributing federal political committee. C
 Name of Employer US GOLF & GAMES Occupation BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

SUBTOTAL of Receipts This Page (optional) ► 176.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. BOLIVAR C. ANDREWS

Mailing Address 5507 SAUVE

City HOUSTON State TX Zip Code 77056-1219

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation RESTAURANTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13940951
 Amount of Each Receipt this Period 25.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GERALDINE E. ANDREWS

Mailing Address 3855 LEGENDS WAY

City MARYVILLE State TN Zip Code 37801-8654

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 10 / 26 / 2010
Transaction ID: SA11.13956396
 Amount of Each Receipt this Period 50.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HERBERT ANDREWS

Mailing Address 45 CEZANNE

City IRVINE State CA Zip Code 92603-0207

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation REAL ESTATE MANAGEMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt 10 / 23 / 2010
Transaction ID: SA11.13947676
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **325.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DR. JOHN D. ANDREWS

Mailing Address 12 ORSINGER FLD

City State Zip Code
SAN ANTONIO TX 78230-1582

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 245.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936503

Amount of Each Receipt this Period

1.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. PAUL E. ANDREWS

Mailing Address 700 JENKINS ROAD

City State Zip Code
ALEDO TX 76008-2408

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
T.T.I. INC. C.E.O.

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13942462

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. PAUL E. ANDREWS

Mailing Address 700 JENKINS ROAD

City State Zip Code
ALEDO TX 76008-2408

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
T.T.I. INC. C.E.O.

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13959327

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2001.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
STANLEY S. ANDREWS

Mailing Address 1260 HIGHLAND LAKES TRL.

City State Zip Code
BIRMINGHAM AL 35242-6850

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13963281

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROGER S. ANERELLA, II

Mailing Address 16 COVERED BRIDGE RD

City State Zip Code
FLEMINGTON NJ 08822-4900

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BANK OF AMERICA MERRILL LYNCH MANAGING DIRECTOR, ELECTRONIC TRADING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13951056

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GERALD W. ANGER

Mailing Address 18360 CHRIS CT

City State Zip Code
GLADSTONE OR 97027-1509

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 381.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13955136

Amount of Each Receipt this Period
75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 5175.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. SUE P. ANGLE

Mailing Address 4600 CONLEY AVENUE

City ODESSA State TX Zip Code 79762-4535

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928957

Amount of Each Receipt this Period
75.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. SOPHIE C. ANTRIM

Mailing Address 936 S COLE DR.

City LAKEWOOD State CO Zip Code 80228-3078

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934659

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. SOPHIE C. ANTRIM

Mailing Address 936 S COLE DR.

City LAKEWOOD State CO Zip Code 80228-3078

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936726

Amount of Each Receipt this Period
1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **101.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. MILDRED E. ANUNSON

Mailing Address 4000 HIDDEN SPRINGS NE

City POULSBO State WA Zip Code 98370-8908

FEC ID number of contributing federal political committee. **C**

Name of Employer RELIABLE STORAGE Occupation BOOKKEEPER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 359.00

Date of Receipt: 10 / 14 / 2010
Transaction ID: SA11.13918887
Amount of Each Receipt this Period: 39.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAMES F. APPELT

Mailing Address 7381 OLD ELM RD

City FORESTVILLE State WI Zip Code 54213-9630

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 29 / 2010
Transaction ID: SA11.13962341
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CHARLES D. APPLEQUIST

Mailing Address 269 VISTA ROYALE CIR W

City PALM DESERT State CA Zip Code 92211-1742

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13935987
Amount of Each Receipt this Period: 1.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 90.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MIKE APPLING

Mailing Address 8209 MALLIE CT

City HOUSTON State TX Zip Code 77055-7509

FEC ID number of contributing federal political committee. **C**

Name of Employer TNT CRANE AND RIGGING INC. Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13940486
Amount of Each Receipt this Period: 250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LINDA L. ARAUJO-WILSON

Mailing Address 3194 LIME ST.

City RIVERSIDE State CA Zip Code 92501-2929

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 11 / 19 / 2010
Transaction ID: SA11.13972131
Amount of Each Receipt this Period: 60.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. LUIS F. ARDON

Mailing Address 151 N. DARBY DRIVE

City ECLECTIC State AL Zip Code 36024-3205

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13943299
Amount of Each Receipt this Period: 30.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 340.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JOHN R. AREND

Mailing Address 1887 E. 71ST

City State Zip Code
TULSA OK 74136-3922

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INTER CHEM EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13942982

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JOHN R. AREND

Mailing Address 1887 E. 71ST

City State Zip Code
TULSA OK 74136-3922

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INTER CHEM EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
MM / DD / YYYY
11 / 09 / 2010

Transaction ID: SA11.13966549

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
LINDA ARGUINZONI

Mailing Address 107 ARD RD.

City State Zip Code
SEAGOVILLE TX 75159-2401

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED ESTATE SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2010

Transaction ID: SA11.13962789

Amount of Each Receipt this Period
90.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 290.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
LINDA ARGUINZONI

Mailing Address 107 ARD RD.

City State Zip Code
SEAGOVILLE TX 75159-2401

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED ESTATE SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13963628

Amount of Each Receipt this Period
75.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ALAN S. ARMSTRONG

Mailing Address ONE WILLIAMS CENTER
49TH FLOOR

City State Zip Code
TULSA OK 74172-0150

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WILLIAMS CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
10 / 14 / 2010

Transaction ID: SA11.13928412

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HUGH W. ARMSTRONG, III

Mailing Address P.O. BOX 745

City State Zip Code
LEWISTON MI 49756-0745

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt
MM / DD / YYYY
10 / 20 / 2010

Transaction ID: SA11.13943335

Amount of Each Receipt this Period
65.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **640.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. KATHERINE C. ARMSTRONG

Mailing Address 23 WORTHINGTON DR

City State Zip Code
BLOOMFIELD CT 06002-5008

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
676.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	7	/	2	0	1	0

Transaction ID: SA11.13969912

Amount of Each Receipt this Period
400.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT C. ARMSTRONG

Mailing Address 1207 JANES LN

City State Zip Code
COLORADO SPRINGS CO 80909-2836

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
316.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	1	0

Transaction ID: SA11.13939796

Amount of Each Receipt this Period
60.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT C. ARMSTRONG

Mailing Address 1207 JANES LN

City State Zip Code
COLORADO SPRINGS CO 80909-2836

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
316.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	1	0

Transaction ID: SA11.13940892

Amount of Each Receipt this Period
60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **520.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT C. ARMSTRONG

Mailing Address 1207 JANES LN

City State Zip Code
COLORADO SPRINGS CO 80909-2836

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 316.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949616

Amount of Each Receipt this Period
70.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LT. COL. GEORGE T. ARMY

Mailing Address 229 WINDMERE TRL

City State Zip Code
MONETA VA 24121-3218

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937018

Amount of Each Receipt this Period
45.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID ARNETTE

Mailing Address 2155 ALEXANDER BLVD

City State Zip Code
MURFREESBORO TN 37130-9015

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SUNBELT MARKETING SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942898

Amount of Each Receipt this Period
80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 195.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MAYNARD C. ARNEY

Mailing Address 659 OSBORNE RD. NE APT. 305

City	State	Zip Code
MINNEAPOLIS	MN	55432-2757

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944098

Amount of Each Receipt this Period

30.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MAYNARD C. ARNEY

Mailing Address 659 OSBORNE RD. NE APT. 305

City	State	Zip Code
MINNEAPOLIS	MN	55432-2757

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946544

Amount of Each Receipt this Period

30.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MAYNARD C. ARNEY

Mailing Address 659 OSBORNE RD. NE APT. 305

City	State	Zip Code
MINNEAPOLIS	MN	55432-2757

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953376

Amount of Each Receipt this Period

30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

90.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MAYNARD C. ARNEY

Mailing Address 659 OSBORNE RD. NE APT. 305

City State Zip Code
MINNEAPOLIS MN 55432-2757

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13956987
Amount of Each Receipt this Period: 30.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DOYLE L. ARNOLD

Mailing Address 1439 PERRYS HOLLOW DR.

City State Zip Code
SALT LAKE CTY UT 84103-4254

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ZIONS BANCORPORATION EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13935590
Amount of Each Receipt this Period: 250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GARY ARNOLD

Mailing Address 5133 1ST ST N

City State Zip Code
ARLINGTON VA 22203-1207

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED FREELANCE WRITER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt: 10 / 29 / 2010
Transaction ID: SA11.13961405
Amount of Each Receipt this Period: 150.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 430.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
						<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JAKE F. ARONOV

Mailing Address PO BOX 235000

City State Zip Code
MONTGOMERY AL 36123-5000

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ARONOV PROPERTIES CHAIRMAN & CEO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13942470

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. MICHAEL K. ARRINGTON

Mailing Address 8374 THREE EAGLE DR

City State Zip Code
FORT COLLINS CO 80528-9359

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2425.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13931290

Amount of Each Receipt this Period

425.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ROBERT ARRIX

Mailing Address 205 MAIN ST APT 29

City State Zip Code
NEW CANAAN CT 06840-5635

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 555.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935740

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10525.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. ANN ARTHUR

Mailing Address 129 RIVERMEAD ROAD

City State Zip Code
PETERBOROUGH NH 03458-1731

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
202.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932888

Amount of Each Receipt this Period

51.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. DAVID H. ASBURY

Mailing Address 950 EAST PACES FERRY RD.

City State Zip Code
ATLANTA GA 30326

FEC ID number of contributing federal political committee. **C**

Name of Employer
NORTHWESTERN BENEFIT CORP.

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
OWNER

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13964400

Amount of Each Receipt this Period

55.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. JANE C. ASH

Mailing Address 6570 EAST SANTA AURELIA DRIVE

City State Zip Code
TUCSON AZ 85715-3126

FEC ID number of contributing federal political committee. **C**

Name of Employer
HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
HOMEMAKER

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13942473

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10106.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CHUCK ASHBY

Mailing Address 14826 SWALE

City State Zip Code
SAN ANTONIO TX 78248-0947

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949499

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. GEORGIA F. ASHBY

Mailing Address 831 E 2ND SOUTH ST

City State Zip Code
CARLINVILLE IL 62626-1930

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950566

Amount of Each Receipt this Period
55.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. GEORGIA F. ASHBY

Mailing Address 831 E 2ND SOUTH ST

City State Zip Code
CARLINVILLE IL 62626-1930

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955163

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 205.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. KENNY ASHBY

Mailing Address 1 NORTHRIDGE WAY

City State Zip Code
SANDY UT 84092-4906

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956278

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. CHARLES R. ASHER

Mailing Address 3525 CEDAR MOUNTAIN AVENUE

City State Zip Code
MELBOURNE FL 32934-8303

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952222

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
GENE T. ASHER

Mailing Address 803 E PARK ST.

City State Zip Code
EMMETT ID 83617-3136

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948282

Amount of Each Receipt this Period
90.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **365.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. DOUGLAS ASHMORE

Mailing Address 1810 SECHRIST COURT

City State Zip Code
VIRGINIA BEACH VA 23454-3547

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928125

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DR. GLENN A. ASHMORE

Mailing Address 3104 NW 23RD STREET

City State Zip Code
OKLAHOMA CITY OK 73107-1902

FEC ID number of contributing federal political committee. **C**

Name of Employer
SELF-EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

DENTIST

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13972820

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JOHN B. ASHMUN

Mailing Address 2929 BUFFALO SPEEDWAY
UNIT 2307

City State Zip Code
HOUSTON TX 77098-1711

FEC ID number of contributing federal political committee. **C**

Name of Employer
SELF-EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

OIL & GAS EXPLORATION PRODUCTION

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954884

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

450.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. THOMAS E. ASPEL

Mailing Address 4820 GLENHOLLOW CIR

City State Zip Code
OCEANSIDE CA 92057-7935

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED DENTIST

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951355

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MYRA J. ASPLUNDH

Mailing Address P.O. BOX 11

City State Zip Code
BRYN ATHYN PA 19009-0011

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 875.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939769

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DARIUS ASSEMI

Mailing Address 1396 WEST HERNDON AVENUE
SUITE 101

City State Zip Code
FRESNO CA 93711-7126

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GRANVILLE HOMES PRESIDENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 11000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13942502

Amount of Each Receipt this Period
11000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 11600.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
FARID ASSEMI

Mailing Address 1396 WEST HERNDON AVENUE
SUITE 101

City State Zip Code
FRESNO CA 93711-7126

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GRANVILLE HOMES, INC. HOME BUILDER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
11000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13942515

Amount of Each Receipt this Period

11000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. FARSHID ASSEMI

Mailing Address 4250 WEST SHAW AVENUE

City State Zip Code
FRESNO CA 93722-6226

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CENTRAL DISTRIBUTING OWNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
8000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13942508

Amount of Each Receipt this Period

8000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. EDWARD G. ASTINGER, III

Mailing Address 4880 SANTA ROSA ROAD

City State Zip Code
CAMARILLO CA 93012-5190

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SALEM COMMUNICATIONS CORP. CEO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13942503

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

21000.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
CRAIG R. ASTOR

Mailing Address 5167 L AND N TURNPIKE

City State Zip Code
HODGENVILLE KY 42748-9232

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UPS AIRCRAFT MECHANIC

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 329.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13958257

Amount of Each Receipt this Period
39.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JOHN J. ATHERTON

Mailing Address 16 COACHLIGHT DR

City State Zip Code
POUGHKEEPSIE NY 12603-4241

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NYSOCA CHEIEF CLERK

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946482

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
CHARLES ATKINS

Mailing Address 661 BERING DR UNIT 210

City State Zip Code
HOUSTON TX 77057-2137

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950000

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

439.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. MARY B. ATKINSON

Mailing Address **8020 FRANKFORD RD APT 316**

City **DALLAS** State **TX** Zip Code **75252-6862**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **251.00**

Date of Receipt **10 / 19 / 2010**

Transaction ID: SA11.13941451

Amount of Each Receipt this Period **51.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. URSELL B. ATKINS

Mailing Address **417 HAMPTON WEST BLVD**

City **MORRISTOWN** State **TN** Zip Code **37814-1001**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **REAL ESTATE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **405.00**

Date of Receipt **10 / 18 / 2010**

Transaction ID: SA11.13937043

Amount of Each Receipt this Period **5.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. URSELL B. ATKINS

Mailing Address **417 HAMPTON WEST BLVD**

City **MORRISTOWN** State **TN** Zip Code **37814-1001**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **REAL ESTATE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **405.00**

Date of Receipt **10 / 18 / 2010**

Transaction ID: SA11.13937720

Amount of Each Receipt this Period **5.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **61.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. URSELL B. ATKINS

Mailing Address 417 HAMPTON WEST BLVD

City State Zip Code
MORRISTOWN TN 37814-1001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED REAL ESTATE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 405.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Transaction ID: SA11.13968118

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. JOSEPHINE L. ATLEY

Mailing Address 495 CRESCENT BLVD

City State Zip Code
CRESCENT PA 15046-4909

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 295.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954250

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. JOSEPHINE L. ATLEY

Mailing Address 495 CRESCENT BLVD

City State Zip Code
CRESCENT PA 15046-4909

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 295.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961836

Amount of Each Receipt this Period
20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 85.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. JOSEPHINE L. ATLEY

Mailing Address 495 CRESCENT BLVD

City State Zip Code
CRESCENT PA 15046-4909

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	4	/	2	0	1	0

Transaction ID: SA11.13965587

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SUSAN ATWELL

Mailing Address 1622 VERAZZANO DR

City State Zip Code
WILMINGTON NC 28405-4224

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13947777

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GARY KEITH AUGTER

Mailing Address 107 N WAYSIDE DR.

City State Zip Code
MCALESTER OK 74501-7630

FEC ID number of contributing federal political committee. **C**

Name of Employer ADVANCED DERMATOLOGY INC.
Occupation DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	1	0

Transaction ID: SA11.13958476

Amount of Each Receipt this Period
75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **315.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. THOMAS V. AUGUSTIN

Mailing Address 735 SHOREWOOD DR

City State Zip Code
DETROIT LAKES MN 56501-4909

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933026

Amount of Each Receipt this Period
51.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. THOMAS V. AUGUSTIN

Mailing Address 735 SHOREWOOD DR

City State Zip Code
DETROIT LAKES MN 56501-4909

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953997

Amount of Each Receipt this Period
72.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID G. AUL, DVM

Mailing Address 835 N.FORREST

City State Zip Code
ARLINGTON HEIGHTS IL 60004-5812

FEC ID number of contributing federal political committee. **C**

Name of Employer CARE Occupation VET

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929799

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **173.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
LARRY AUSTERMILLER

Mailing Address 31 CARLTON CIR

City State Zip Code
INVERNESS IL 60010-5400

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961644

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GEORGE AUSTIN

Mailing Address 10459 132ND AVE. NE

City State Zip Code
KIRKLAND WA 98033-4750

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918461

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. SHIZUKO AUSTIN

Mailing Address 21255 JOHN MILLESS DR APT 208

City State Zip Code
ROGERS MN 55374-4725

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 820.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956738

Amount of Each Receipt this Period
160.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **460.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. FRANKLIN U. AUTRY

Mailing Address 9300 MARBELLA DR.

City State Zip Code
FORT WORTH TX 76126-1930

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 14500.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 1 0

Transaction ID: SA11.13966560

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
G AVENT

Mailing Address P.O. BOX 210

City State Zip Code
KINGSTREE SC 29556-0210

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953359

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
G AVENT

Mailing Address P.O. BOX 210

City State Zip Code
KINGSTREE SC 29556-0210

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 1 0

Transaction ID: SA11.13972090

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2700.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. ELLEN AVERSA

Mailing Address 29 CENTER ROAD

City State Zip Code
WOODBIDGE CT 06525-1629

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2010

Transaction ID: SA11.13965168

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. TERESA V. AVERSA

Mailing Address 12 HORSEGUARD LN

City State Zip Code
SCARSDALE NY 10583-2311

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2010

Transaction ID: SA11.13928021

Amount of Each Receipt this Period
35.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ALLEN A. AVERY

Mailing Address 1718 LOS PRADOS TRAIL

City State Zip Code
ARLINGTON TX 76006-6512

FEC ID number of contributing federal political committee. **C**

Name of Employer AV-TECH INDUSTRIES, INC.
Occupation PRESIDENT/OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
868.00

Date of Receipt
MM / DD / YYYY
11 / 09 / 2010

Transaction ID: SA11.13967176

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **285.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. LESLIE F. AVRITT

Mailing Address 2530 RAYMELL DR

City State Zip Code
SAN DIEGO CA 92123-3544

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 410.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13937490

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. FRED H. AWE

Mailing Address 12000 FM 3139

City State Zip Code
DALHART TX 79022-7623

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED FARMER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 850.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	1	0

Transaction ID: SA11.13940452

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. MARCY AYANIAN

Mailing Address 4233 COOLIDGE AVE

City State Zip Code
LOS ANGELES CA 90066-5415

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SINAY CO WRITER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 445.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	9	/	2	0	1	0

Transaction ID: SA11.13961880

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

200.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES E. AYRES

Mailing Address 22916 STYLES STREET

City State Zip Code
WOODLAND HILLS CA 91367-1622

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954383

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. HARDAM S. AZAD

Mailing Address 701 N. POST OAK ROAD
SUITE 515

City State Zip Code
HOUSTON TX 77024-3970

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
COM. REALTY OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956731

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ARTHUR AZZARA

Mailing Address 16552 FOUNTAIN LN.

City State Zip Code
HUNTINGTON BEACH CA 92647-4370

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 287.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955666

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 390.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 82 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT H. BABST, SR.
Mailing Address 1423 S. MCLEAN BLVD.
City State Zip Code
WICHITA KS 67213-4302
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
METAL FINISHING CO. INC. CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 294.00
Date of Receipt: 10 / 28 / 2010
Transaction ID: SA11.13957995
Amount of Each Receipt this Period: 39.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PAUL W. BACHAN
Mailing Address 825 DELAWARE ST
City State Zip Code
WATSONVILLE CA 95076-2803
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
SELF-EMPLOYED ATTORNEY
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 661.00
Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13931496
Amount of Each Receipt this Period: 125.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DONALD BACHLEDA
Mailing Address 812 SCHOEN CT
City State Zip Code
CARMEL IN 46032
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
RETIRED RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 340.00
Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13940456
Amount of Each Receipt this Period: 60.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 224.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ANGELA E. BACHMAN
 Mailing Address 12700 OAKDALE VIEW DR
 City State Zip Code
EDMOND OK 73013-7554
 Date of Receipt
MM / DD / YYYY
10 / 29 / 2010
 Transaction ID: SA11.13961544
 Amount of Each Receipt this Period
100.00
 CONTRIBUTION
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
BACKMAN SERVICES, INC. CEO
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 720.00

B. Full Name (Last, First, Middle Initial)
MR. BRUCE A. BACHMAN
 Mailing Address 17 PHEASANT RDG S
 City State Zip Code
WILMINGTON DE 19807-1540
 Date of Receipt
MM / DD / YYYY
10 / 18 / 2010
 Transaction ID: SA11.13934065
 Amount of Each Receipt this Period
100.00
 CONTRIBUTION
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
RETIRED RETIRED
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 490.00

C. Full Name (Last, First, Middle Initial)
MR. BRUCE A. BACHMAN
 Mailing Address 17 PHEASANT RDG S
 City State Zip Code
WILMINGTON DE 19807-1540
 Date of Receipt
MM / DD / YYYY
10 / 21 / 2010
 Transaction ID: SA11.13946864
 Amount of Each Receipt this Period
200.00
 CONTRIBUTION
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
RETIRED RETIRED
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 490.00

SUBTOTAL of Receipts This Page (optional) ► 400.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. BRUCE A. BACHMAN

Mailing Address 17 PHEASANT RDG S

City State Zip Code
WILMINGTON DE 19807-1540

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 490.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13951083

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. NORMAN L. BACK

Mailing Address 2812 SIENA ROAD

City State Zip Code
LIVERMORE CA 94550-4734

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LAWRENCE LIVERMORE NATL LABORATORY PHYSICIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 395.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957334

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. NORMAN L. BACK

Mailing Address 2812 SIENA ROAD

City State Zip Code
LIVERMORE CA 94550-4734

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LAWRENCE LIVERMORE NATL LABORATORY PHYSICIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 395.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 1 0

Transaction ID: SA11.13965202

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **125.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 85 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. NORMAN L. BACK

Mailing Address 2812 SIENA ROAD

City State Zip Code
LIVERMORE CA 94550-4734

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LAWRENCE LIVERMORE NATL LABORATORY PHYSICIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 395.00

Date of Receipt
MM / DD / YYYY
11 / 19 / 2010

Transaction ID: SA11.13971521

Amount of Each Receipt this Period
30.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAVE BACKS

Mailing Address 724 E 12TH AVE

City State Zip Code
BOWLING GREEN KY 42101-2530

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ALL SEASONS GAS GRILL-FIR-ESIDE OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2010

Transaction ID: SA11.13928502

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVE BACKS

Mailing Address 724 E 12TH AVE

City State Zip Code
BOWLING GREEN KY 42101-2530

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ALL SEASONS GAS GRILL-FIR-ESIDE OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
11 / 17 / 2010

Transaction ID: SA11.13969498

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **130.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 86 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. HERBERT M. BACON

Mailing Address **1135 W 3RD NORTH ST**

City **MORRISTOWN** State **TN** Zip Code **37814**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HAMBLÉN COUNTY TM.** Occupation **JUDGE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **411.00**

Date of Receipt **10 / 19 / 2010**

Transaction ID: SA11.13941671

Amount of Each Receipt this Period **51.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. ISABELLE M. BACON

Mailing Address **400 PACTOLUS RD.**

City **KINGSPORT** State **TN** Zip Code **37663-3094**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **201.00**

Date of Receipt **10 / 18 / 2010**

Transaction ID: SA11.13936497

Amount of Each Receipt this Period **1.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CAROLINE BADEN

Mailing Address **4826 AVEDON RD.**

City **MOORPARK** State **CA** Zip Code **93021-2419**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **10 / 26 / 2010**

Transaction ID: SA11.13956085

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **152.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 87 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MR. LORIN R. BADER</p> <p>Mailing Address 3542 W DIVISION ROAD</p> <p>City State Zip Code PERU IN 46970-8047</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 490.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 11 / 05 / 2010</p> <p>Transaction ID: SA11.13966249</p> <p>Amount of Each Receipt this Period 75.00</p> <p>CONTRIBUTION</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) MRS. CYNTHIA BAEHL</p> <p>Mailing Address 1607 SCENIC MOUNTAIN CT.</p> <p>City State Zip Code KINGWOOD TX 77345-1886</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation HOMEMAKER HOMEMAKER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 21 / 2010</p> <p>Transaction ID: SA11.13945254</p> <p>Amount of Each Receipt this Period 100.00</p> <p>CONTRIBUTION</p>
--	--

<p>C. Full Name (Last, First, Middle Initial) MR. VERLYN W. BAER</p> <p>Mailing Address 203 QUINELLE DR</p> <p>City State Zip Code PERRY GA 31069-3772</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation KAY & ASSOC. INC METEROLOGY TECHNICIAN</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 410.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 18 / 2010</p> <p>Transaction ID: SA11.13931466</p> <p>Amount of Each Receipt this Period 250.00</p> <p>CONTRIBUTION</p>
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SUBTOTAL of Receipts This Page (optional)	425.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. THOMAS N. BAGWELL		Date of Receipt MM / DD / YYYY 11 / 09 / 2010		
	Mailing Address 64705 LELAND DRIVE		Transaction ID: SA11.13967206		
	City CUMMING	State GA	Zip Code 30041	Amount of Each Receipt this Period 3300.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
	Name of Employer AMERICAN PROTEINS, INC.	Occupation CHAIRMAN/OWNER	Aggregate Year-to-Date 3300.00		

B.	Full Name (Last, First, Middle Initial) MR. ALI BAHRAMAN		Date of Receipt MM / DD / YYYY 10 / 21 / 2010		
	Mailing Address 1040 VIA VENTANA		Transaction ID: SA11.13946954		
	City PLS VRDS EST.	State CA	Zip Code 90274-2731	Amount of Each Receipt this Period 80.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
	Name of Employer RAYTHEON CORP.	Occupation ENGINEER	Aggregate Year-to-Date 280.00		

C.	Full Name (Last, First, Middle Initial) GERALD N. BAILEY		Date of Receipt MM / DD / YYYY 11 / 17 / 2010		
	Mailing Address 2717 PATTON RD.		Transaction ID: SA11.13969826		
	City GRIFFIN	State GA	Zip Code 30224-7305	Amount of Each Receipt this Period 60.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
	Name of Employer RETIRED	Occupation RETIRED	Aggregate Year-to-Date 370.00		

SUBTOTAL of Receipts This Page (optional)	3440.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 89 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MR. IRA V. BAILEY</p> <p>Mailing Address 45-090 NAMOKU ST APT 1011</p> <p>City State Zip Code KANEEOHE HI 96744-5319</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 311.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 20 / 2010</p> <p>Transaction ID: SA11.13943708</p> <p>Amount of Each Receipt this Period 50.00</p> <p>CONTRIBUTION</p>
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<p>B. Full Name (Last, First, Middle Initial) MR. JAMES R. BAILES</p> <p>Mailing Address 401 10TH ST STE. 500</p> <p>City State Zip Code HUNTINGTON WV 25701-2223</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 201.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 11 / 17 / 2010</p> <p>Transaction ID: SA11.13969844</p> <p>Amount of Each Receipt this Period 101.00</p> <p>CONTRIBUTION</p>
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<p>C. Full Name (Last, First, Middle Initial) JUDY BAILEY</p> <p>Mailing Address 713 HERITAGE DR. NE</p> <p>City State Zip Code WINTER HAVEN FL 33881-5718</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation STATE FARM CLAIM REP</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 300.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 28 / 2010</p> <p>Transaction ID: SA11.13959026</p> <p>Amount of Each Receipt this Period 300.00</p> <p>CONTRIBUTION</p>
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SUBTOTAL of Receipts This Page (optional)	451.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 90 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
TASE E. BAILEY

Mailing Address 8991 UNIVERSITY PKWY. APT. 218

City State Zip Code
PENSACOLA FL 32514-8499

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950093

Amount of Each Receipt this Period 50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
WALTER W. BAILEY

Mailing Address 3620 SPRING VALLEY RD

City State Zip Code
BIRMINGHAM AL 35223-1524

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 399.00

Date of Receipt M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13964553

Amount of Each Receipt this Period 39.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. DALE L. BAIRD

Mailing Address 110 VANTAGE VIEW DR

City State Zip Code
PETOSKEY MI 49770-9211

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13931186

Amount of Each Receipt this Period 1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 90.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 91 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. DOROTHY L. BAIRD

Mailing Address 2913 VIA CARRIO

City State Zip Code
CARLSBAD CA 92010-8341

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1751.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13951729

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. HARY BAIRD

Mailing Address 22236 WOODLAWN AVE

City State Zip Code
BROOKSVILLE FL 34601-2701

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957100

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JOHN P. BAIRD

Mailing Address 11 BELLERIVE COUNTRY CLB.

City State Zip Code
SAINT LOUIS MO 63141-7320

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 601.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939833

Amount of Each Receipt this Period

1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

251.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 92 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JOSEPH BAIRD

Mailing Address 3737 SOUTHRIDGE WAY

City State Zip Code
OCEANSIDE CA 92056-5427

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930155

Amount of Each Receipt this Period

15.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JOSEPH BAIRD

Mailing Address 3737 SOUTHRIDGE WAY

City State Zip Code
OCEANSIDE CA 92056-5427

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950324

Amount of Each Receipt this Period

30.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. RENE W. BAIRD

Mailing Address P.O. BOX 15

City State Zip Code
INVERNESS MS 38753-0015

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936286

Amount of Each Receipt this Period

35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 93 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DR. BEN F. BAKER

Mailing Address 3400 SE FRANK PHILLIPS
SUITE 202

City State Zip Code
BARTLESVILLE OK 74006-2407

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
PHYSICIAN

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13951061

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. BRUCE BAKER

Mailing Address 401 9TH STREET, NW
SUITE 900

City State Zip Code
WASHINGTON DC 20004-2145

FEC ID number of contributing federal political committee. **C**

Name of Employer
NIXON & PEABODY

Occupation
ATTORNEY

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

261.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 0 / 2 0 1 0

Transaction ID: SA11.13968688

Amount of Each Receipt this Period

261.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. CAROL BAKER

Mailing Address 30573 E SUNSET DR. S

City State Zip Code
REDLANDS CA 92373-7340

FEC ID number of contributing federal political committee. **C**

Name of Employer
SELF-EMPLOYED

Occupation
SELF-EMPLOYED

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

801.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930253

Amount of Each Receipt this Period

201.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1462.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 94 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. CAROL BAKER

Mailing Address 30573 E SUNSET DR. S

City State Zip Code
REDLANDS CA 92373-7340

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 801.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 1 0

Transaction ID: SA11.13972051

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CHRISTOPHER BAKER

Mailing Address 401 9TH STREET N.W.
SUITE 900

City State Zip Code
WASHINGTON DC 20004-2145

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NIXON PEABODY ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 0 / 2 0 1 0

Transaction ID: SA11.13968702

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. EDWIN T. BAKER

Mailing Address P.O. BOX 90

City State Zip Code
WAYNE ME 04284-0090

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956557

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 650.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 95 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. ELISSA M. BAKER

Mailing Address 4902 KAYLAN COURT

City State Zip Code
RICHMOND TX 77407-8509

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957932

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
EVERETT L. BAKER

Mailing Address RR 5 BOX 410

City State Zip Code
BUTLER MO 64730-9176

FEC ID number of contributing federal political committee. **C**

Name of Employer
SELF-EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

FARMER

Aggregate Year-to-Date ▼
406.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939228

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. GEORGE D. BAKER

Mailing Address 921 RIPLEY LN.

City State Zip Code
OYSTER BAY NY 11771-4605

FEC ID number of contributing federal political committee. **C**

Name of Employer
ESTABROOK CAPITAL MANAGEM-
ENT

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INVESTMENT MANAGER

Aggregate Year-to-Date ▼
739.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 1 0

Transaction ID: SA11.13928730

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

650.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 96 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GEORGE D. BAKER

Mailing Address 921 RIPLEY LN.

City OYSTER BAY State NY Zip Code 11771-4605

FEC ID number of contributing federal political committee. **C**

Name of Employer ESTABROOK CAPITAL MANAGEMENT Occupation INVESTMENT MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 739.00

Date of Receipt 10 / 22 / 2010

Transaction ID: SA11.13945593

Amount of Each Receipt this Period 50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JAMES B. BAKER

Mailing Address 925 RED MESA DR

City COLORADO SPRINGS State CO Zip Code 80906-4527

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt 10 / 22 / 2010

Transaction ID: SA11.13949323

Amount of Each Receipt this Period 100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES H. BAKER

Mailing Address 1906 OWENS DR.

City BLOOMINGTON State IL Zip Code 61701-7135

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 447.00

Date of Receipt 10 / 19 / 2010

Transaction ID: SA11.13940764

Amount of Each Receipt this Period 80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 230.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 97 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
KAREN JOAN-HYDE BAKER

Mailing Address 3059 FAIRVIEW LANE

City State Zip Code
LONG LAKE MN 55356-9718

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA11.13931237
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KAREN JOAN-HYDE BAKER

Mailing Address 3059 FAIRVIEW LANE

City State Zip Code
LONG LAKE MN 55356-9718

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13944061
Amount of Each Receipt this Period: 101.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RICHARD H. BAKER

Mailing Address 9132 HIGHLAND GARDENS RD

City State Zip Code
BATON ROUGE LA 70811-2719

FEC ID number of contributing federal political committee. **C**

Name of Employer MANAGED FUNDS ASSOCIATION Occupation PRESIDENT/CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt: 11 / 05 / 2010
Transaction ID: SA11.13966054
Amount of Each Receipt this Period: 2400.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 2601.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 98 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. SYBIL S. BAKER

Mailing Address 7255 E QUINCY AVE APT 309
APARTMENT 309

City DENVER State CO Zip Code 80237-2224

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 281.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13948490
Amount of Each Receipt this Period: 21.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. SYBIL S. BAKER

Mailing Address 7255 E QUINCY AVE APT 309
APARTMENT 309

City DENVER State CO Zip Code 80237-2224

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 281.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13953070
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. THOMAS E. BAKER

Mailing Address 102 STEUBEN DR APT 10
APT 10

City GUILDERLAND State NY Zip Code 12084-9695

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13946623
Amount of Each Receipt this Period: 15.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 61.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 99 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. THOMAS R. BAKER

Mailing Address 5801 CREIGHTON HILL RD

City State Zip Code
LOUISVILLE KY 40207-2211

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 310.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13931347

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
KATHLEEN BALDERSTON

Mailing Address 401 9TH STREET, NW
SUITE 900

City State Zip Code
WASHINGTON DC 20004-2145

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NIXON & PEABODY ATTORNEY

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1048.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 0 / 2 0 1 0

Transaction ID: SA11.13968686

Amount of Each Receipt this Period

1048.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. WILLIAM BALDERSTON, III

Mailing Address 28 WHITESTONE LN

City State Zip Code
ROCHESTER NY 14618-4126

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957182

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1348.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. LYNNE BALDWIN		Date of Receipt
	Mailing Address 10001 FREDERICK STREET		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 7 / 2 0 1 0
	City	State	Zip Code
	OMAHA	NE	68124-2650
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13955798
Name of Employer BALDWIN HACKETT		Occupation PRESIDENT	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 800.00	<input type="text"/> 400.00
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) MR. RICHARD BALDWIN, JR.		Date of Receipt
	Mailing Address 139 PLANTATION DR		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 1 8 / 2 0 1 0
	City	State	Zip Code
	SAINT LOUIS	MO	63141-8352
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13935466
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 550.00	<input type="text"/> 250.00
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) MR. RICHARD L. BALDWIN		Date of Receipt
	Mailing Address 11090 WASHINGTON RD		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 1 4 / 2 0 1 0
	City	State	Zip Code
	CLINTON	IL	61727-9133
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13930194
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 901.00	<input type="text"/> 501.00
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1151.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 101 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. LESTER BALE

Mailing Address PO BOX 224

City State Zip Code
HORSE CAVE KY 42749-0224

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BALE OIL CO. INC. PRESIDENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955936

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. RONALD J. BALING

Mailing Address 129 VANDER RD

City State Zip Code
WEXFORD PA 15090-7446

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CINTAR INC ARCHITECT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13960395

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DR. MARGARET J. BALL

Mailing Address 13434 ABOITE CENTER RD

City State Zip Code
FORT WAYNE IN 46814-9736

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931638

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

660.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 102 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JERRY H. BALLENGEE

Mailing Address 2731 WYCLIFFE AVE SW

City State Zip Code
ROANOKE VA 24014-2337

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939466

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JERRY H. BALLENGEE

Mailing Address 2731 WYCLIFFE AVE SW

City State Zip Code
ROANOKE VA 24014-2337

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13964540

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES W. BALMER

Mailing Address 11 OAK PARK LN NE

City State Zip Code
IOWA CITY IA 52240-9180

FEC ID number of contributing federal political committee. **C**

Name of Employer PLUMBER SUPPLY COMPANY Occupation OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951610

Amount of Each Receipt this Period
105.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **205.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 103 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
PAUL DAVID BALMERT

Mailing Address 1023 TANGLE BRIAR

City State Zip Code
SEABROOK TX 77586-4522

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1001.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 22 / 2010

Transaction ID: SA11.13948552

Amount of Each Receipt this Period
501.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. BILL BALTRUSCH

Mailing Address P.O. BOX 111

City State Zip Code
HAVRE MT 59501-0111

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1001.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 19 / 2010

Transaction ID: SA11.13941661

Amount of Each Receipt this Period
1001.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. BERNADENE M. BANE

Mailing Address P.O. BOX 146

City State Zip Code
WOLBACH NE 68882-0146

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 27 / 2010

Transaction ID: SA11.13958668

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1527.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 104 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DAVID M. BANET

Mailing Address 652 BYERS RD

City State Zip Code
CHESTER SPRINGS PA 19425-2104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DAVID M. BANET & ASSOCS INSURANCE BROKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13957640

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KATHY BANG

Mailing Address P.O. BOX 1925

City State Zip Code
CARMEL CA 93921-1925

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 1 0

Transaction ID: SA11.13928783

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PATRICIA A. BANKERT

Mailing Address 1025 S US HWY. 421

City State Zip Code
ZIONSVILLE IN 46077-8843

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BOONE CO OFFICE CLERK

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962599

Amount of Each Receipt this Period
60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 2810.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 105 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. MARTIN BANKS

Mailing Address 8440 BURKHART RD.

City State Zip Code
HOUSTON TX 77055-7526

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BRITAIN ELECTRIC CO BUSINESS OWNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 537.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13932271

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
CAROL C. BARBER

Mailing Address 2109 BASKET LN APT 706

City State Zip Code
LAWRENCEBURG IN 47025-7769

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 280.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946906

Amount of Each Receipt this Period

45.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. FRANCES H. BARBER

Mailing Address 1424 STEMLEY BRIDGE RD

City State Zip Code
TALLADEGA AL 35160-6225

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED ACCOUNTANT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963579

Amount of Each Receipt this Period

101.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

246.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 106 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. H. RIGEL BARBER

Mailing Address 321 W. MENOMONEE STEET

City State Zip Code
CHICAGO IL 60614-5341

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940455

Amount of Each Receipt this Period

400.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JOHN BARBEY

Mailing Address 1920 SPINDRIFT DRIVE

City State Zip Code
LA JOLLA CA 92037-3352

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961823

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. RONALD D. BARCLAY

Mailing Address 6512 CHARLES CT

City State Zip Code
MACUNGIE PA 18062-8970

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918661

Amount of Each Receipt this Period

15.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10415.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 107 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ALVIN L. BARDEN

Mailing Address 4427 CHAIN O LAKES RD.

City State Zip Code
EAGLE RIVER WI 54521-7500

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949591

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. LORRAINE W. BARDSLEY

Mailing Address P.O. BOX 54

City State Zip Code
HOLICONG PA 18928-0054

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932880

Amount of Each Receipt this Period
11.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. LORRAINE W. BARDSLEY

Mailing Address P.O. BOX 54

City State Zip Code
HOLICONG PA 18928-0054

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954606

Amount of Each Receipt this Period
10.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 71.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. GORDON BARKER	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 2037 RIVERKNOLL CT	Transaction ID: SA11.13945352
	City State Zip Code WEST LINN OR 97068-3696	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 710.00	

B.	Full Name (Last, First, Middle Initial) MR. LOWELL R. BARKER	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 1517 W SCHWARTZ BLVD	Transaction ID: SA11.13933165
	City State Zip Code LADY LAKE FL 32159-2162	Amount of Each Receipt this Period 101.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 201.00	

C.	Full Name (Last, First, Middle Initial) MR. JAMES C. BARKLEY	Date of Receipt MM / DD / YYYY 10 / 29 / 2010
	Mailing Address 12239 WARRIOR TRL	Transaction ID: SA11.13959061
	City State Zip Code KNOXVILLE TN 37922-5462	Amount of Each Receipt this Period 210.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 760.00	

SUBTOTAL of Receipts This Page (optional)	511.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. WAYNE S. BARLOW	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 116 FOUNDERS DRIVE	Transaction ID: SA11.13947122
	City State Zip Code FLAT ROCK NC 28731-9568	Amount of Each Receipt this Period 35.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

B.	Full Name (Last, First, Middle Initial) MR. JOHN F. BARNA	Date of Receipt MM / DD / YYYY 11 / 16 / 2010
	Mailing Address 122 HEATHER COURT	Transaction ID: SA11.13969258
	City State Zip Code PALM DESERT CA 92260-6748	Amount of Each Receipt this Period 201.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 286.00	

C.	Full Name (Last, First, Middle Initial) MR. JOHN W. BARNARD	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address PO BOX 236	Transaction ID: SA11.13938609
	City State Zip Code SAINT PETERS PA 19470-0236	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional)	▶	286.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DR. MICHAEL BARNARD, M.D.	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 681 PIFER	Transaction ID: SA11.13977293A
	City HOUSTON State TX Zip Code 77024-5432	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation PHYSICIAN	CHARGED BACK \$5,000.00 ON 11/16/2010
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

B.	Full Name (Last, First, Middle Initial) DR. MICHAEL BARNARD, M.D.	Date of Receipt MM / DD / YYYY 11 / 16 / 2010
	Mailing Address 681 PIFER	Transaction ID: SA11.13977293B
	City HOUSTON State TX Zip Code 77024-5432	Amount of Each Receipt this Period -5000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation PHYSICIAN	CHARGED BACK
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

C.	Full Name (Last, First, Middle Initial) MR. WILLIAM R. BARNARD	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 3423 GLOUCESTER LN	Transaction ID: SA11.13958362
	City GREENSBORO State NC Zip Code 27410-2415	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	100.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 111 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. COSNTANCE C. BARNES
Mailing Address 1509 SALTVALE RD.
City State Zip Code
WYOMING NY 14591-9511
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 256.00
Date of Receipt 10 / 25 / 2010
Transaction ID: SA11.13953112
Amount of Each Receipt this Period 20.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. COSNTANCE C. BARNES
Mailing Address 1509 SALTVALE RD.
City State Zip Code
WYOMING NY 14591-9511
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 256.00
Date of Receipt 11 / 15 / 2010
Transaction ID: SA11.13968774
Amount of Each Receipt this Period 11.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DONALD B. BARNES
Mailing Address 427 PINE ST
City State Zip Code
GRASS VALLEY CA 95945-7351
FEC ID number of contributing federal political committee. **C**
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 201.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13933166
Amount of Each Receipt this Period 21.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 52.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 112 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DONALD B. BARNES

Mailing Address 427 PINE ST

City State Zip Code
GRASS VALLEY CA 95945-7351

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt
MM / DD / YYYY
10 / 28 / 2010

Transaction ID: SA11.13959903

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. ELIZABETH M. BARNES

Mailing Address PARTRIDGE KNOLL
400 PEACEDALE STREET

City State Zip Code
BRISTOL CT 06010-2392

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
MM / DD / YYYY
10 / 29 / 2010

Transaction ID: SA11.13961822

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. JACQUELINE BARNES

Mailing Address PO BOX 508

City State Zip Code
FORT VALLEY GA 31030-0508

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
11 / 19 / 2010

Transaction ID: SA11.13971027

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **325.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 113 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JACK L. BARNES

Mailing Address 9254 W FOREST DRIVE

City ELWOOD State IN Zip Code 46036-8878

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13946177

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JACK L. BARNES

Mailing Address 9254 W FOREST DRIVE

City ELWOOD State IN Zip Code 46036-8878

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY
10 / 28 / 2010

Transaction ID: SA11.13960261

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
LLOYD N. BARNES

Mailing Address 1209 LINDBERGH AVE

City ZANESVILLE State OH Zip Code 43701-7717

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13942164

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 190.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 114 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. MARGARET A. BARNES

Mailing Address 2260 BENT CREEK DR.

City State Zip Code
JACKSON MO 63755-3241

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 961.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941738

Amount of Each Receipt this Period

241.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ROGER A. BARNES

Mailing Address 21732 CHINQUAPIN RD

City State Zip Code
SPRINGDALE AR 72764-9053

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 560.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13931461

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. RUSSELL G. BARNEY

Mailing Address 7515 S. CASS AVENUE

City State Zip Code
DARIEN IL 60561

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
STATE FARM AGT INDEPENDANT INSURANCE AGENT

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935671

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

641.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. THOMAS O. BARNETT	Date of Receipt MM / DD / YYYY 10 / 17 / 2010
	Mailing Address 1980 MASSACHUSETTES AVENUE	Transaction ID: SA11.13928799
	City State Zip Code MCLEAN VA 22101-4910	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation COVINGTON & BURLING ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

B.	Full Name (Last, First, Middle Initial) MS. ELLEN BARON	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 14387 FLOURCASTLE COURT	Transaction ID: SA11.13941877
	City State Zip Code CENTREVILLE VA 20120-3350	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation USG SECURITY OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

C.	Full Name (Last, First, Middle Initial) MR. ROBERT J. BARONI	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 21 DILLON RD. STE. J	Transaction ID: SA11.13928895
	City State Zip Code HILTON HEAD ISLAND SC 29926-3657	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation ASSOCIATED CONSTRUCTION CONSULTANTS, I CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	900.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 116 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MISS ANGIE BARR

Mailing Address 151 LYNN DR NW

City ROME State GA Zip Code 30165-6167

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 470.00

Date of Receipt 11 / 19 / 2010
Transaction ID: SA11.13972058
Amount of Each Receipt this Period 250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAMES BARR

Mailing Address 78613 ALLIANCE WAY

City PALM DESERT State CA Zip Code 92211-3071

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 26 / 2010
Transaction ID: SA11.13957360
Amount of Each Receipt this Period 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. DIANE BARRETT

Mailing Address 297 BEE TREE PT

City LAKE LURE State NC Zip Code 28746-8601

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 435.00

Date of Receipt 11 / 19 / 2010
Transaction ID: SA11.13970039
Amount of Each Receipt this Period 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 400.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 117 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. ROSE M. BARRETT

Mailing Address 10025 N E 129TH PLACE

City State Zip Code
KIRKLAND WA 98034-2801

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EVERGREEN WASHELLI FUNERAL RECEPTIONIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928909

Amount of Each Receipt this Period
55.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM E. BARRETT

Mailing Address P.O. BOX 366

City State Zip Code
LEXINGTON NE 68850-0366

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946638

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. BRENDAN BARRICK

Mailing Address 319 HODENCAMP RD APT 80

City State Zip Code
THOUSAND OAKS CA 91360-5635

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SECRETS SECURITY SERVICES SENIOR TAX ANALYST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918624

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **180.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DONALD BARRICK		Date of Receipt
	Mailing Address 7 VAN WYCK LN.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 19 / 2010
	City	State	Zip Code
	HUNTINGTON	NY	11743-1724
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13931752
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 410.00
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) HUEY P. BARRILLEAUX		Date of Receipt
	Mailing Address 1310 FAWN RIDGE DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 22 / 2010
	City	State	Zip Code
	DUNCANVILLE	TX	75137-3621
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13949633
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MR. NOLAN BARRICK		Date of Receipt
	Mailing Address 1717 NORFOLK AVE APT 1123 APT 1123		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 19 / 2010
	City	State	Zip Code
	LUBBOCK	TX	79416-6088
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13942001
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 30.00
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 490.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 119 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. NOLAN BARRICK

Mailing Address 1717 NORFOLK AVE APT 1123
APT 1123

City State Zip Code
LUBBOCK TX 79416-6088

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 216.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958938

Amount of Each Receipt this Period

30.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. RICHARD BARRON

Mailing Address 611 MARLOWE STREET

City State Zip Code
FREDERICKTOWN MO 63645-1715

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956937

Amount of Each Receipt this Period

35.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. RICHARD BARRON

Mailing Address 611 MARLOWE STREET

City State Zip Code
FREDERICKTOWN MO 63645-1715

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958895

Amount of Each Receipt this Period

40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

105.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 120 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. RICHARD BARRON

Mailing Address 611 MARLOWE STREET

City State Zip Code
FREDERICKTOWN MO 63645-1715

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 1 0

Transaction ID: SA11.13966260

Amount of Each Receipt this Period

35.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
ROBERTA BARRON

Mailing Address 180 EAST PEARSON STREET APT 35

City State Zip Code
CHICAGO IL 60611

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 800.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935512

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. ADOLYN C. BARTELS

Mailing Address P.O. BOX 246

City State Zip Code
INMAN KS 67546-0246

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961643

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

385.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 121 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. CHARLES J. BARTER

Mailing Address 274 JACKSON BLVD

City State Zip Code
MOBILE AL 36609-2420

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 390.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955726

Amount of Each Receipt this Period

40.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. MARLENE G. BARTEL

Mailing Address 6660 CRAMPTON CT

City State Zip Code
SAN DIEGO CA 92119-2409

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NKM INC MERCHANT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 261.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952993

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ANDREW F. BARTH

Mailing Address 2200 CHAUCER ROAD

City State Zip Code
SAN MARINO CA 91108-1314

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CAPITAL GROUP COMPANIES INVESTMENT MANAGEMENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 12700.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13948191

Amount of Each Receipt this Period

12700.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

12790.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 122 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM OSCAR BARTHOLOMAUS

Mailing Address 8550 LE BERTHON ST.

City State Zip Code
SUNLAND CA 91040-2320

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933182

Amount of Each Receipt this Period
51.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. EDWARD R. BARTLEY

Mailing Address 12811 KENT CT.

City State Zip Code
CARMEL IN 46032-8648

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NORTHWEST RADIOLOGY PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940624

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. EDWARD R. BARTLEY

Mailing Address 12811 KENT CT.

City State Zip Code
CARMEL IN 46032-8648

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NORTHWEST RADIOLOGY PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953643

Amount of Each Receipt this Period
75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **226.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 123 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
SLEETA A. BARTLETT

Mailing Address 12803 S 29TH E AVE

City BIXBY State OK Zip Code 74008-3664

FEC ID number of contributing federal political committee. **C**

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt: 10 / 15 / 2010

Transaction ID: SA11.13928258

Amount of Each Receipt this Period: 65.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BETTYE D. BARTO

Mailing Address 2063 BRAWLEY SCHOOL RD.

City MOORESVILLE State NC Zip Code 28117-7082

FEC ID number of contributing federal political committee. **C**

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 10 / 18 / 2010

Transaction ID: SA11.13935685

Amount of Each Receipt this Period: 120.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BETTYE D. BARTO

Mailing Address 2063 BRAWLEY SCHOOL RD.

City MOORESVILLE State NC Zip Code 28117-7082

FEC ID number of contributing federal political committee. **C**

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 10 / 22 / 2010

Transaction ID: SA11.13950865

Amount of Each Receipt this Period: 120.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 305.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 124 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. PATRICK M. BARTON

Mailing Address 20828 BRIMSTONE RD.

City State Zip Code
CEDAREEDGE CO 81413-8327

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13949090

Amount of Each Receipt this Period
55.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT J. BARTON, JR.

Mailing Address 4101 LAUREL GREEN CIR.

City State Zip Code
VIRGINIA BEACH VA 23456-6351

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CITY OF VIRGINIA BEACH SYSTEM ANALYST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13941843

Amount of Each Receipt this Period
35.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. CAROL BUSH BASHANT

Mailing Address 55 VENETIAN DR

City State Zip Code
LK HOPATCONG NJ 07849-2223

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2010

Transaction ID: SA11.13962681

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 290.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 125 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JAMES K. BASKIN

Mailing Address P.O. BOX 1380

City State Zip Code
MENLO PARK CA 94026-1380

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED BUSINESS EXECUTIVE

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954991

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOSEPH L. BASRALIAN

Mailing Address 710 ONEIDA TRL

City State Zip Code
FRANKLIN LAKES NJ 07417-2217

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WINNE, BANTA ATTORNEY

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 800.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 1 0

Transaction ID: SA11.13928793

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DONALD H. BASS

Mailing Address 11368 BERTS LN

City State Zip Code
HAMMOND LA 70401-4737

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED CARPENTER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 205.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955859

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

725.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 126 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. DOROTHY M. BASTON

Mailing Address 617 MOELLER AVENUE

City State Zip Code
CINCINNATI OH 45217-1121

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 551.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936898

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. DOROTHY M. BASTON

Mailing Address 617 MOELLER AVENUE

City State Zip Code
CINCINNATI OH 45217-1121

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 551.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961732

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ED S. BATCHELDER

Mailing Address 9808 FIELDCREST DR

City State Zip Code
OMAHA NE 68114-4935

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
U S CHECK BOOK CO PRESIDENT

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 465.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13957722

Amount of Each Receipt this Period

210.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

360.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 127 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
KATHY BATCHA
Mailing Address 4314 TIMBER GREEN

City State Zip Code
DALLAS TX 75287

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
IDD HEALTHCARE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959045
Amount of Each Receipt this Period
25.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RAYMOND E. BATCHELOR
Mailing Address PO BOX 701166

City State Zip Code
TULSA OK 74170-1166

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BHC PIPE & EQUIPMENT SALES

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942978
Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GORDON W. BATES
Mailing Address 750 COURTNEY DR

City State Zip Code
CROWN POINT IN 46307-4364

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13965316
Amount of Each Receipt this Period
25.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **550.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 128 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. LAWRENCE E. BATHGATE, II	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 8 / 2 0 1 0
	Mailing Address 701 EAST AVENUE	Transaction ID: SA11.13958248
	City State Zip Code BAY HEAD NJ 08742-5314	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation BATHGATE, WEGENER & WOLF SR. PARTNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) BEATRICE BATT	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 2 / 2 0 1 0
	Mailing Address PO BOX 116	Transaction ID: SA11.13945330
	City State Zip Code THOMPSONS TX 77481-0116	Amount of Each Receipt this Period 110.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.00	

C.	Full Name (Last, First, Middle Initial) MR. MELVIN L. BATTLES, III	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 1 0
	Mailing Address 33 EAGLE CREEK DR	Transaction ID: SA11.13933550
	City State Zip Code NORWALK OH 44857-8850	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SELF-EMPLOYED INSURANCE AGENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional)	▶	1210.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. DOROTHY L. BATTS

Mailing Address 104 LAKESIDE DR.

City Warner Robins State GA Zip Code 31088-5624

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13944283
 Amount of Each Receipt this Period: 1.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MARGARET BAUEE

Mailing Address 16 TIDE WATER

City Irvine State CA Zip Code 92614-7448

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13937106
 Amount of Each Receipt this Period: 500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GEO E. BAUER

Mailing Address 122 N ITHACA ST

City Ithaca State MI Zip Code 48847-1228

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13954405
 Amount of Each Receipt this Period: 200.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **701.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 130 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. ELEANOR M. BAUER

Mailing Address 11510 ORLEANS LN.

City State Zip Code
PORT RICHEY FL 34668-1128

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13952036

Amount of Each Receipt this Period
60.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. ELEANOR M. BAUER

Mailing Address 11510 ORLEANS LN.

City State Zip Code
PORT RICHEY FL 34668-1128

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13953510

Amount of Each Receipt this Period
60.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN H. BAUMGARTNER, JR.

Mailing Address 2886 HIGHLAND AVE

City State Zip Code
BROOMALL PA 19008-1059

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13935505

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **220.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 131 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. PAUL L. BAUMGRAS

Mailing Address 3079 JODECO DR

City State Zip Code
JONESBORO GA 30236-5319

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954735

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. BARBARA N. BAUR

Mailing Address 5307 WESTMINSTER PLACE

City State Zip Code
PITTSBURGH PA 15232-2120

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13957707

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HILTON BAXTER

Mailing Address 216 BIG BAXTER RD.

City State Zip Code
SPRINGHILL LA 71075-4823

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944266

Amount of Each Receipt this Period
1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1026.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 132 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. FRANCES E. BAYRACK

Mailing Address 155 E WYLAND WAY

City State Zip Code
MONROVIA CA 91016-5043

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 332.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952162

Amount of Each Receipt this Period
60.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. FRANCES E. BAYRACK

Mailing Address 155 E WYLAND WAY

City State Zip Code
MONROVIA CA 91016-5043

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 332.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961599

Amount of Each Receipt this Period
61.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MAX BAYS

Mailing Address 2916 COLD SPRING WAY

City State Zip Code
CROFTON MD 21114-2860

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MERKLE INC MARKETING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13945273

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 221.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 133 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
RONALD T. BEACH

Mailing Address P.O. BOX 682

City State Zip Code
CREEDE CO 81130-0682

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 451.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933311

Amount of Each Receipt this Period
151.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BART BEAL

Mailing Address 1223 PASSAGE WAY

City State Zip Code
PLAINFIELD IN 46168-3278

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CINERGY CORP OPERATIONS MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951574

Amount of Each Receipt this Period
110.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. BRUCE A. BEAL, JR.

Mailing Address 60 COLUMBUS CIRCLE
19TH FLOOR

City State Zip Code
NEW YORK NY 10023-5802

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RELATED COMPANIES, INC. INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13945235

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 5261.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

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(check only one)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GEORGE C. BEALS

Mailing Address 1404 LEWIS RIDGE VIEW

City State Zip Code
COLORADO SPRINGS CO 80907-7141

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955056

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RALPH K. BEALS

Mailing Address 410 N VINE ST.

City State Zip Code
STEWARDSON IL 62463-1060

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 351.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954303

Amount of Each Receipt this Period
150.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. GAIL B. BEAM

Mailing Address 581 WOODS RD

City State Zip Code
HARRISONBURG VA 22801-2305

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS TRUCK DRIVER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13957696

Amount of Each Receipt this Period
160.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **510.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. DIXIE L. BEAR

Mailing Address 21 GLEN ECHO

City State Zip Code
TRABUCO CYN CA 92679-3507

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959128

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOANNE BEAR

Mailing Address 3510 E KIEHL AVE APT. 1003

City State Zip Code
SHERWOOD AR 72120-3572

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 278.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948784

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOYCE P. BEARD

Mailing Address 428 TREMONT PARK DR. SE

City State Zip Code
LENOIR NC 28645-4633

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948868

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **340.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JOYCE P. BEARD

Mailing Address 428 TREMONT PARK DR. SE

City LENOIR State NC Zip Code 28645-4633

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

Date of Receipt: 10 / 28 / 2010
Transaction ID: SA11.13960270
 Amount of Each Receipt this Period: 185.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MARY H. BEARDEN

Mailing Address 7277 ABERDEEN PARKWAY E

City TULSA State OK Zip Code 74132-2139

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 11 / 15 / 2010
Transaction ID: SA11.13968979
 Amount of Each Receipt this Period: 25.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. AMOS T. BEASON

Mailing Address P.O. BOX 837

City LAGRANGE State GA Zip Code 30241-0014

FEC ID number of contributing federal political committee. **C**

Name of Employer MORGAN STANLEY AND BARNERY Occupation FINANCIAL ADVISOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 17 / 2010
Transaction ID: SA11.13928796
 Amount of Each Receipt this Period: 100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 310.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. LAPRETTA BEAUCHAMP

Mailing Address 15932 PRELL CT

City State Zip Code
FOUNTAIN VALLEY CA 92708-1155

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 576.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13949987

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. LAPRETTA BEAUCHAMP

Mailing Address 15932 PRELL CT

City State Zip Code
FOUNTAIN VALLEY CA 92708-1155

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 576.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13963321

Amount of Each Receipt this Period
30.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. M CAROLYN BEAUCHAMP

Mailing Address P.O. BOX 112

City State Zip Code
PERRYVILLE MD 21903-0112

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13955299

Amount of Each Receipt this Period
80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **150.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 138 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MAURICE BEAZLEY

Mailing Address 101 SILVER SPRING DR

City State Zip Code
LOCUST GROVE VA 22508-5175

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930132

Amount of Each Receipt this Period
60.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CHARLES E. BECK

Mailing Address 854 PINE VALLEY RD

City State Zip Code
NEW RINGGOLD PA 17960-9402

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936937

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NICK BECKWITH

Mailing Address P.O. BOX 1429

City State Zip Code
STOCKBRIDGE MA 01262-1429

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED INVESTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942942

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **410.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 139 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MARY LANDIS BEDDINFIELD		Date of Receipt
	Mailing Address 19119 JUANITA LN.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 19 / 2010
	City	State	Zip Code
	CORNELIUS	NC	28031-7082
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13941780
Name of Employer DIRECT PAY		Occupation SALES	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	<input type="text"/> 100.00
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) JOSHUA BEDELL		Date of Receipt
	Mailing Address 88 LEONARD ST #608		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 14 / 2010
	City	State	Zip Code
	NEW YORK	NY	10013-3495
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13967837
Name of Employer GOLDMAN SACHS		Occupation INVESTMENT BANKER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	<input type="text"/> 1000.00
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MR. DAVID F. BEDEY		Date of Receipt
	Mailing Address 224 S 5TH ST		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 19 / 2010
	City	State	Zip Code
	HAMILTON	MT	59840-2747
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13931886
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 430.00	<input type="text"/> 220.00
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1320.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 140 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
BARBARA BEDINGFIELD

Mailing Address 100 SUNSET DRIVE

City State Zip Code
VIDALIA GA 30474-3017

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
VIDALIA PHARMACY PHARMACIST'S ASSISTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928101

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MICHAEL J. BEER

Mailing Address 8500 INNISFREE DRIVE

City State Zip Code
SPRINGFIELD VA 22153-1710

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WILLIAMS AND JENSEN PRINCIPAL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13948178

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL J. BEER

Mailing Address 8500 INNISFREE DRIVE

City State Zip Code
SPRINGFIELD VA 22153-1710

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WILLIAMS AND JENSEN PRINCIPAL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13948203

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1100.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 141 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. KENNETH BEGHIN

Mailing Address 9736 BLUE VALLEY RD

City State Zip Code
MOUNT HOREB WI 53572-2653

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	1	0

Transaction ID: SA11.13931873

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
EUGENE BEGO

Mailing Address 4552 OAK ARBOR NE

City State Zip Code
GRAND RAPIDS MI 49525-9462

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13952999

Amount of Each Receipt this Period
30.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. ROBERT BEHAR, M.D.

Mailing Address 5406 AMERICAN BEAUTY COURT

City State Zip Code
HOUSTON TX 77041-6535

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	1	0

Transaction ID: SA11.13958246

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **5080.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DOUGLAS BEHLING	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 1898 ISLA DE LA GAITA	Transaction ID: SA11.13918677
	City State Zip Code SAN YSIDRO CA 92173-1822	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

B.	Full Name (Last, First, Middle Initial) MR. JAMES BEHM	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 5 WOODLAND COURT	Transaction ID: SA11.13937497
	City State Zip Code TRENTON NJ 08610-2724	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) MRS. ELSA P. BEHNEY	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 5320 VINCENT AVE	Transaction ID: SA11.13940847
	City State Zip Code LOS ANGELES CA 90041-1434	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation HOMEMAKER HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional)	▶	360.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 143 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. BONNA LEE BEHNKEN

Mailing Address 12170 AIR HILL RD

City State Zip Code
BROOKVILLE OH 45309-9364

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 381.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932955

Amount of Each Receipt this Period

201.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. ANN MARIE BEHRENDT

Mailing Address 6915 GULL COURT

City State Zip Code
VENTURA CA 93003-6280

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931910

Amount of Each Receipt this Period

30.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. JOAN BELFORD

Mailing Address 7 GREENBRIAR DR

City State Zip Code
SAYVILLE NY 11782-1414

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 335.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 1 0

Transaction ID: SA11.13970951

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

281.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 144 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. BRUCE BELL

Mailing Address P.O. BOX 108

City State Zip Code
MOUNT MARION NY 12456-0108

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ULSTER CTY HOUSEKEEPER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 487.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2010

Transaction ID: SA11.13931238

Amount of Each Receipt this Period
20.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BRUCE BELL

Mailing Address P.O. BOX 108

City State Zip Code
MOUNT MARION NY 12456-0108

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ULSTER CTY HOUSEKEEPER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 487.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13963385

Amount of Each Receipt this Period
1.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. BRUCE BELL

Mailing Address P.O. BOX 108

City State Zip Code
MOUNT MARION NY 12456-0108

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ULSTER CTY HOUSEKEEPER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 487.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13963621

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 46.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 145 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. LEONARD BELL

Mailing Address 94 N. PLANK RD.

City State Zip Code
NEWBURGH NY 12550-1715

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
D BELLS ETHAN ALLEN GALLERY PRESIDENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13947787

Amount of Each Receipt this Period
60.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MICHAEL BELL

Mailing Address 640 RUBY TRUST WAY

City State Zip Code
CASTLE ROCK CO 80108-8803

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CURIAN CAPITAL PRESIDENT AND CEO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	1	0

Transaction ID: SA11.13932382

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PHYLLIS J. BELL

Mailing Address 4434 NICHOLL DR

City State Zip Code
MOBILE AL 36619-9749

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	1	0

Transaction ID: SA11.13945319

Amount of Each Receipt this Period
160.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **470.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 146 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. RANDALL BELL

Mailing Address 20 W SIDE DR

City State Zip Code
REHOBOTH BEACH DE 19971-1302

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940856

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JAMES R. BELLEFEUIL

Mailing Address 14965 ABBEY LN.

City State Zip Code
BATH MI 48808-7709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BSA SOFTWARE PROGRAMMER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934975

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DALE E. BELLIS

Mailing Address 9688 HOCKING ST NW

City State Zip Code
MASSILLON OH 44646-9060

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LEGACY MANAGEMENT GROUP LTD. OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13968550

Amount of Each Receipt this Period
300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 900.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 147 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. NICK F. BELLI

Mailing Address 22480 FERDINAND DR

City State Zip Code
SALINAS CA 93908-1126

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SALINAS CITY ELEMENTARY EDUCATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951297

Amount of Each Receipt this Period
80.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. TOMMY BELLOMY

Mailing Address 105 W CHARLOTTE AVE

City State Zip Code
SCOTTSBORO AL 35768-1717

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950144

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WARREN S. BELLOWS

Mailing Address 3612 WICKERSHAM LN

City State Zip Code
HOUSTON TX 77027-4138

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928667

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **680.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 148 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RICHARD J. BELONGIA

Mailing Address 2813 12TH STREET

City State Zip Code
TWO RIVERS WI 54241-3311

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939605

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN H. BELT

Mailing Address 43 TOWN PATH

City State Zip Code
GLEN COVE NY 11542-2728

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED REAL ESTATE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941069

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RICHARD BEMIS

Mailing Address 2020 TERRAZA PL

City State Zip Code
FULLERTON CA 92835-3308

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED ELECTRICAL ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 895.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955664

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 550.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 149 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RICHARD BEMIS

Mailing Address 2020 TERRAZA PL

City State Zip Code
FULLERTON CA 92835-3308

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED ELECTRICAL ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 895.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2010

Transaction ID: SA11.13962544

Amount of Each Receipt this Period
105.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GUSTAVO O. BENAVIDES

Mailing Address 281 RIVER COVE RD

City State Zip Code
HUNTSVILLE AL 35811-8010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CAS, INC. ENGINEERING MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
10 / 20 / 2010

Transaction ID: SA11.13944236

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES J. BENDER

Mailing Address 1810 EAST 32ND PLACE

City State Zip Code
TULSA OK 74105-2220

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WILLIAMS COMPANIES EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
10 / 20 / 2010

Transaction ID: SA11.13945249

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1205.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 150 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. BARBARA B. BENEDICT
 Mailing Address 300 S OAK ST
 City State Zip Code
 SAPULPA OK 74066-4348
 Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 2 2 / 2 0 1 0
Transaction ID: SA11.13950374
 Amount of Each Receipt this Period
 100.00
CONTRIBUTION
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 301.00

B. Full Name (Last, First, Middle Initial)
MR. JULINE BENEMILLER
 Mailing Address P.O. BOX 29
 City State Zip Code
 BLOOMFIELD NJ 07003-0029
 Date of Receipt
 M M / D D / Y Y Y Y
 1 1 / 2 2 / 2 0 1 0
Transaction ID: SA11.13972870
 Amount of Each Receipt this Period
 75.00
CONTRIBUTION
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 THE FIL-AM INSURANCE AGEN- CY INC INSURANCE AGENT
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 625.00

C. Full Name (Last, First, Middle Initial)
MR. BRUCE P. BENGTON
 Mailing Address 91 CARDINAL RD.
 City State Zip Code
 READING PA 19610-2517
 Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 1 8 / 2 0 1 0
Transaction ID: SA11.13936901
 Amount of Each Receipt this Period
 80.00
CONTRIBUTION
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1040.00

SUBTOTAL of Receipts This Page (optional) ► 255.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 151 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. RICHARD J. BENICASA

Mailing Address 53 S WASHINGTON ST.

City State Zip Code
TARRYTOWN NY 10591

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
METRO NORTH RR RAILROAD WORKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953434

Amount of Each Receipt this Period

20.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DR. CORAZON R. BENIG

Mailing Address P.O. BOX 912

City State Zip Code
WORTH IL 60482-0802

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941149

Amount of Each Receipt this Period

35.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DR. CORAZON R. BENIG

Mailing Address P.O. BOX 912

City State Zip Code
WORTH IL 60482-0802

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956667

Amount of Each Receipt this Period

55.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 152 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. CAROL BENJAMIN

Mailing Address P.O. BOX 594

City State Zip Code
AKRON CO 80720-0594

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 235.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937671

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. ANNETTE BENNETT

Mailing Address 11825 WOODLAND VIEW DR

City State Zip Code
FREDERICKSBURG VA 22407-8561

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GECO CLAIMS EXAMINER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 215.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929629

Amount of Each Receipt this Period

75.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

BETTYE W. BENNETT

Mailing Address 500 TOPSIDE DR.

City State Zip Code
AZLE TX 76020-4929

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 330.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950560

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DAVID L. BENNER

Mailing Address 1160 COLD SPRINGS RD

City State Zip Code
FAIRFIELD PA 17320-9453

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EL VISTA ORCHARDS INC. PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938611

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. MARGARET A. BENNETT

Mailing Address 14255 ROSEMARY LN. APT. 8321
APT 8321

City State Zip Code
LARGO FL 33774-2947

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956146

Amount of Each Receipt this Period
20.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL L. BENNETT

Mailing Address 12128 JACK PINE TRL

City State Zip Code
EDEN PRAIRIE MN 55347-4629

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SUPERVALU COMPUTER OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930389

Amount of Each Receipt this Period
30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 100.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL L. BENNETT

Mailing Address 12128 JACK PINE TRL

City State Zip Code
EDEN PRAIRIE MN 55347-4629

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SUPERVALU COMPUTER OPERATOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941139

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RICHARD G. BENNETT

Mailing Address 1694 E. HAYDEN AVENUE

City State Zip Code
HAYDEN ID 83835-9524

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918423

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. CAROL P. BENNIS

Mailing Address 291 FISHER LANDING RD

City State Zip Code
JARVISBURG NC 27947-9527

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928961

Amount of Each Receipt this Period
75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1115.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. FREDERIC N. BENNING

Mailing Address 18135 VINTAGE ST.

City State Zip Code
NORTHRIDGE CA 91325-1052

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 590.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954970

Amount of Each Receipt this Period
300.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. SUSAN A. BENON

Mailing Address 10 BROWNSBURY RD

City State Zip Code
LAGUNA NIGUEL CA 92677-9381

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946460

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DONALD A. BENSON

Mailing Address 22020 JELAN AVE

City State Zip Code
APPLE VALLEY CA 92307-4008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13928601

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **425.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 156 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOHN A. BENSON

Mailing Address 38 RED FOX LN

City State Zip Code
LITTLETON CO 80127-5713

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INVESTMENT TRUST COMPANY INVESTMENT MANAGMENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13939581

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM BENTLEY

Mailing Address 16375 SOMERSET DR.

City State Zip Code
BROOMFIELD CO 80023-8081

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2010

Transaction ID: SA11.13965206

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JERRY BENTON

Mailing Address 3508 DELTA PL

City State Zip Code
DEL CITY OK 73115-4326

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 289.00

Date of Receipt
MM / DD / YYYY
10 / 14 / 2010

Transaction ID: SA11.13927996

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 100.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 157 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RANDALL A. BENTON

Mailing Address 541 33RD ST NW

City State Zip Code
E WENATCHEE WA 98802-8272

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13932055

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM C. BENTON

Mailing Address 115 PAINTED BUNTING LN

City State Zip Code
GEORGETOWN TX 78633-4800

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929082

Amount of Each Receipt this Period
35.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN BERBERIAN

Mailing Address 113 QUAKER LN.

City State Zip Code
HAVERFORD PA 19041-1033

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942544

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 260.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 158 / 3187

(check only one)

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<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JOHN H. BERG

Mailing Address 2338 DRUMMOND DRIVE

City State Zip Code
YUBA CITY CA 95991-8400

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13942122

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JOHN H. BERG

Mailing Address 2338 DRUMMOND DRIVE

City State Zip Code
YUBA CITY CA 95991-8400

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 1 0

Transaction ID: SA11.13967435

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ROBERT A. BERG

Mailing Address 5464 LIVERPOOL ST

City State Zip Code
WAUNAKEE WI 53597-8420

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934920

Amount of Each Receipt this Period

5.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

105.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 159 / 3187
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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT A. BERG

Mailing Address 5464 LIVERPOOL ST

City State Zip Code
WAUNAKEE WI 53597-8420

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
MM / DD / YYYY
11 / 22 / 2010

Transaction ID: SA11.13972885

Amount of Each Receipt this Period
5.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MISS GRETA BERGAN

Mailing Address 10533 W ROSS AVE

City State Zip Code
PEORIA AZ 85382-5178

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13931502

Amount of Each Receipt this Period
110.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. CARI B. BERGER

Mailing Address 5209 HILLINGDON RD

City State Zip Code
CHARLOTTE NC 28226-7359

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2010

Transaction ID: SA11.13962525

Amount of Each Receipt this Period
110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 225.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 160 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. DENIS J. BERGERON, III	Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 1 0
	Mailing Address 11 LARKSPUR LANE	Transaction ID: SA11.13955866
	City State Zip Code COVINGTON LA 70433-4428	Amount of Each Receipt this Period 210.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

B.	Full Name (Last, First, Middle Initial) MR. HENRY B. BERGEY	Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 1 0
	Mailing Address 462 HARLEYSVILLE PIKE	Transaction ID: SA11.13944560
	City State Zip Code FRANCONIA PA 18924-6000	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer BERGEYS INC	Occupation SELF-EMPLOYED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

C.	Full Name (Last, First, Middle Initial) MR. HENRY B. BERGEY	Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 1 0
	Mailing Address 462 HARLEYSVILLE PIKE	Transaction ID: SA11.13945069
	City State Zip Code FRANCONIA PA 18924-6000	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer BERGEYS INC	Occupation SELF-EMPLOYED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional)	410.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 161 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. ELTA C. BERGOLD
Mailing Address 72 UNION AVE

City State Zip Code
RONKONKOMA NY 11779-5815

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951299

Amount of Each Receipt this Period

205.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
NOREEN BERGOLD
Mailing Address 40 PINTAIL DR

City State Zip Code
OCEAN PINES MD 21811-1738

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935756

Amount of Each Receipt this Period

60.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
NOREEN BERGOLD
Mailing Address 40 PINTAIL DR

City State Zip Code
OCEAN PINES MD 21811-1738

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13962918

Amount of Each Receipt this Period

60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

325.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 162 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DR. RUSSELL BERGUM	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 1101 9TH ST N	Transaction ID: SA11.13954748
	City State Zip Code VIRGINIA MN 55792-2372	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer DULUTH CLINIC	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) MR. ROBERT BERIAULT	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 5 CHURCHILL DRIVE	Transaction ID: SA11.13957708
	City State Zip Code ENGLEWOOD CO 80113-4001	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer LINCOLN TRUST COMPANY	Occupation CHAIRMAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

C.	Full Name (Last, First, Middle Initial) JIMMIE K. BERKEY	Date of Receipt MM / DD / YYYY 11 / 22 / 2010
	Mailing Address P.O. BOX 5177	Transaction ID: SA11.13972997
	City State Zip Code FARMINGTON NM 87499-5177	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

SUBTOTAL of Receipts This Page (optional)	▶	2210.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 163 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. GARRY D. BERKGREN
Mailing Address 122 PLUM AVE

City State Zip Code
OAKLEY KS 67748-1248

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951539

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
SCOTT BERKOWITZ
Mailing Address 252 TENTH ST NE

City State Zip Code
WASHINGTON DC 20002-6214

FEC ID number of contributing federal political committee. **C**

Name of Employer
A&I PUBLISHING

Occupation

CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928808

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
SCOTT BERKOWITZ
Mailing Address 252 TENTH ST NE

City State Zip Code
WASHINGTON DC 20002-6214

FEC ID number of contributing federal political committee. **C**

Name of Employer
A&I PUBLISHING

Occupation

CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13957620

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

300.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 164 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT E. BERNARDI

Mailing Address 21620 GINGER CT.

City State Zip Code
TEHACHAPI CA 93561-9487

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
231.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953791

Amount of Each Receipt this Period
1.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LYLE H. BERNDT

Mailing Address 3769 TOWN PARK RD

City State Zip Code
STURGEON BAY WI 54235-9434

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933214

Amount of Each Receipt this Period
51.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. MARGARET BERNHEIM

Mailing Address P.O. BOX 6928

City State Zip Code
BEND OR 97708-6928

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER
Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954879

Amount of Each Receipt this Period
235.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **287.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 165 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. MARIETTA BERNOT

Mailing Address 7615 WOODRIDGE CIR

City State Zip Code
ALEXANDRIA VA 22308-1060

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INTL TRADE SERVICES CORP CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955112

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. GAIL W. BERRALL

Mailing Address 4115 WOODSIDE DRIVE

City State Zip Code
HARRISONBURG VA 22801-2365

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 591.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929089

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. BRADLEY BERRY

Mailing Address 500 W BROADWAY ST
SUITE 320

City State Zip Code
MISSOULA MT 59802-4031

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INTERNATIONAL HEART INSTI-
TUTE OF MONTA DOCTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959066

Amount of Each Receipt this Period
300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 750.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 166 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DANIEL L. BERRY

Mailing Address 491 GOLF VIEW DRIVE

City State Zip Code
DOTHAN AL 36301-7819

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TWITCHELL COPORATION IT PROGRAMMER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944138

Amount of Each Receipt this Period
1.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DANIEL L. BERRY

Mailing Address 491 GOLF VIEW DRIVE

City State Zip Code
DOTHAN AL 36301-7819

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TWITCHELL COPORATION IT PROGRAMMER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944498

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DOWLTON BERRY

Mailing Address 2372 SUNSET CURV

City State Zip Code
UPLAND CA 91784-1069

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1981.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934677

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 201.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 167 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DOWLTON BERRY

Mailing Address 2372 SUNSET CURV

City UPLAND State CA Zip Code 91784-1069

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1981.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13940450
 Amount of Each Receipt this Period: 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DOWLTON BERRY

Mailing Address 2372 SUNSET CURV

City UPLAND State CA Zip Code 91784-1069

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1981.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13943982
 Amount of Each Receipt this Period: 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DOWLTON BERRY

Mailing Address 2373 SUNSET CURV

City UPLAND State CA Zip Code 91784-1069

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13949396
 Amount of Each Receipt this Period: 100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 300.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 168 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DOWLTON BERRY

Mailing Address 2372 SUNSET CURV

City UPLAND State CA Zip Code 91784-1069

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1981.00

Date of Receipt 10 / 25 / 2010
Transaction ID: SA11.13953725
Amount of Each Receipt this Period 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DOWLTON BERRY

Mailing Address 2372 SUNSET CURV

City UPLAND State CA Zip Code 91784-1069

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1981.00

Date of Receipt 10 / 26 / 2010
Transaction ID: SA11.13956071
Amount of Each Receipt this Period 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. ELIZABETH H. BERRY

Mailing Address PO BOX 309

City ARAB State AL Zip Code 35016-0309

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt 10 / 21 / 2010
Transaction ID: SA11.13942629
Amount of Each Receipt this Period 40.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 240.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 169 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. ELIZABETH H. BERRY

Mailing Address PO BOX 309

City ARAB State AL Zip Code 35016-0309

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt: 11 / 19 / 2010
Transaction ID: SA11.13971095
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN W. BERRY, JR.

Mailing Address 348 CROMWELL COURT

City NAPLES State FL Zip Code 34108-7719

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 12500.00

Date of Receipt: 10 / 27 / 2010
Transaction ID: SA11.13959330
Amount of Each Receipt this Period: 10000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROCKWOOD N. BERRY

Mailing Address 206 W ORANGE ST.

City DAVENPORT State FL Zip Code 33837-3118

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 856.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA11.13928527
Amount of Each Receipt this Period: 39.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 10079.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 170 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ROCKWOOD N. BERRY

Mailing Address 206 W ORANGE ST.

City State Zip Code
DAVENPORT FL 33837-3118

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 856.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13969820

Amount of Each Receipt this Period

39.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. FRANCIS J. BERTONE

Mailing Address 3311 82ND STREET

City State Zip Code
JACKSON HEIGHTS NY 11372

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 401.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932919

Amount of Each Receipt this Period

51.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. RICHARD L. BESHEARS

Mailing Address 12092 CALLE DE MARIA

City State Zip Code
SAN DIEGO CA 92128-2720

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934612

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

290.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 171 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JOHN M. BETTS
Mailing Address 2500 INDIGO LN. UNIT 354
City GLENVIEW State IL Zip Code 60026-8307
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 531.00
Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13940662
Amount of Each Receipt this Period 120.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHN M. BETTS
Mailing Address 2500 INDIGO LN. UNIT 354
City GLENVIEW State IL Zip Code 60026-8307
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 531.00
Date of Receipt 10 / 25 / 2010
Transaction ID: SA11.13954553
Amount of Each Receipt this Period 70.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LESLEY BETTS
Mailing Address 8913 WOOD GLEN DR.
City ROWLETT State TX Zip Code 75088-4860
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 295.00
Date of Receipt 11 / 08 / 2010
Transaction ID: SA11.13966995
Amount of Each Receipt this Period 35.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 225.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 172 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. KATHLEEN D. BETZOLD

Mailing Address 1950 220TH STREET E

City State Zip Code
FARMINGTON MN 55024-9732

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13947853

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. WILLIAM S. BEUTEL

Mailing Address 5 GINGER LAKE DR W

City State Zip Code
GLEN CARBON IL 62034-3304

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
312.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13938837

Amount of Each Receipt this Period

11.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. WILLIAM S. BEUTEL

Mailing Address 5 GINGER LAKE DR W

City State Zip Code
GLEN CARBON IL 62034-3304

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
312.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943981

Amount of Each Receipt this Period

20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

131.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 173 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM S. BEUTEL

Mailing Address 5 GINGER LAKE DR W

City State Zip Code
GLEN CARBON IL 62034-3304

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 312.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952604

Amount of Each Receipt this Period
10.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. FRANK F. BEVACQUA

Mailing Address 317 FORESTER WAY

City State Zip Code
PARK RIDGE NJ 07656-2611

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CITIGROUP EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952078

Amount of Each Receipt this Period
300.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JUDITH A. BEVILLE

Mailing Address 2998 FRANCISCAN WAY

City State Zip Code
CARMEL CA 93923-9216

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959669

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **560.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 174 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. LARRY N. BEVINS

Mailing Address 105 MENCHVILLE RD

City State Zip Code
NEWPORT NEWS VA 23602-6730

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928106

Amount of Each Receipt this Period

35.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ADOLPH L. BEYERLEIN

Mailing Address 307 LANCELOT DR.

City State Zip Code
CLEMSON SC 29631-2130

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1610.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13951094

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. PETER C. BEYRODT

Mailing Address 2021 SUE CREEK DR

City State Zip Code
ESSEX MD 21221-1931

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935119

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

485.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 175 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. PATRICIA BHARWADA

Mailing Address 6211 N 74TH PL

City State Zip Code
SCOTTSDALE AZ 85250-5502

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13931618

Amount of Each Receipt this Period
110.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LYNN R. BIDDISON

Mailing Address P.O. BOX 69280

City State Zip Code
TUCSON AZ 85737-0013

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13937475

Amount of Each Receipt this Period
75.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. STANLEY T. BIENUS

Mailing Address 1306 RANCHO ENCINITAS DR.

City State Zip Code
ENCINITAS CA 92024-7027

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13937270

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 285.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 176 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOSEPH WILLIAM BIERMAN

Mailing Address 905 BERMUDA ST.

City BAKERSFIELD State CA Zip Code 93309-2905

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13956053
 Amount of Each Receipt this Period: 1.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. DANIEL L. BIERY

Mailing Address 17 NEEDHAM AVE

City PHELPS State NY Zip Code 14532-9614

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3375.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13931467
 Amount of Each Receipt this Period: 250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. DANIEL L. BIERY

Mailing Address 17 NEEDHAM AVE

City PHELPS State NY Zip Code 14532-9614

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3375.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13947860
 Amount of Each Receipt this Period: 250.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 501.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 177 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
THOMAS W. BIGELOW

Mailing Address 7 DARNLEY GRN

City State Zip Code
DELMAR NY 12054-9707

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934156

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
THOMAS W. BIGELOW

Mailing Address 7 DARNLEY GRN

City State Zip Code
DELMAR NY 12054-9707

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952972

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. BRUCE R. BIGFORD

Mailing Address 627 TOPINABEE RD

City State Zip Code
NILES MI 49120-3036

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958610

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

200.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 178 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. BOBBY I. BIGGS

Mailing Address 101 S CHURCH ST

City State Zip Code
LA PLATA MO 63549-1126

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER BEST EFFORTS

Occupation
FARMER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	4	/	2	0	1	0

Transaction ID: SA11.13930372

Amount of Each Receipt this Period
150.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. HRISTO BIJEV

Mailing Address 2100 TULARE ST STE 407

City State Zip Code
FRESNO CA 93721-2111

FEC ID number of contributing federal political committee. **C**

Name of Employer
HRISTO PROFESSIONAL INC

Occupation
OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	8	/	2	0	1	0

Transaction ID: SA11.13966765

Amount of Each Receipt this Period
300.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WADE BILDEN

Mailing Address 10 N MAIN ST

City State Zip Code
NORTHWOOD ND 58267-4005

FEC ID number of contributing federal political committee. **C**

Name of Employer
PAUL BILDEN PHARMACY INC.

Occupation
PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	4	/	2	0	1	0

Transaction ID: SA11.13918440

Amount of Each Receipt this Period
150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **600.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 179 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. GLORIA M. BILINSKI

Mailing Address 2717 SPRAGUE DR

City State Zip Code
WALDORF MD 20601-3022

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944849

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ROGER BILLINGS

Mailing Address 1086 WALNUT WOODS PLACE

City State Zip Code
LAKE MARY FL 32746-4454

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
VOLUSIA COUNTY SCHOOLS-FL TEACHER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951100

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. FLOYD W. BILLS

Mailing Address 1813 S 1ST. AVE

City State Zip Code
CHEYENNE WY 82007-3315

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 271.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942692

Amount of Each Receipt this Period
20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **370.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 180 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. FLOYD W. BILLS

Mailing Address 1813 S 1ST. AVE

City State Zip Code
CHEYENNE WY 82007-3315

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 271.00

Date of Receipt
MM / DD / YYYY
11 / 18 / 2010

Transaction ID: SA11.13969606

Amount of Each Receipt this Period
30.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. HENRY J. BILOW

Mailing Address 1110 FIDLER LANE
APT. 702

City State Zip Code
SILVER SPRING MD 20910-3429

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NAVAL RESEARCH LABORATORY ELECTRICAL ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2010

Transaction ID: SA11.13964797

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LT. COL. LEAN BINDER

Mailing Address P.O. BOX 284

City State Zip Code
DELAWARE CITY DE 19706-0284

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 615.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13952141

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 105.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 181 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. SIGRID C. BINDER		Date of Receipt
	Mailing Address 2362 FOXHAVEN DR E		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	JACKSONVILLE	FL	32224-3099
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: SA11.13931594
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="100.00"/>
		<input type="text" value="250.00"/>	CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MR. ARTHUR W. BINE		Date of Receipt
	Mailing Address 21075 310TH ST		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	BEAMAN	IA	50609-8535
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: SA11.13940421
Name of Employer SELF-EMPLOYED		Occupation FARMER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="155.00"/>
		<input type="text" value="409.00"/>	CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MR. THOMAS E. BINGHAM		Date of Receipt
	Mailing Address 3069 OLD HILLSBOROUGH RD		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	MEBANE	NC	27302-8197
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: SA11.13947857
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="100.00"/>
		<input type="text" value="295.00"/>	CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="355.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 182 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DR. NANCY BINTER

Mailing Address 490 LIME KILN RD

City State Zip Code
CHARLOTTE VT 05445-9143

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 399.99

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13932276

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. KATHERINE R. BIRCK

Mailing Address 744 S. OAK STREET

City State Zip Code
HINSDALE IL 60521-4636

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WOMEN'S HEALTHCARE OF HINSDALE ADMINISTRATOR

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951396

Amount of Each Receipt this Period

210.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ANTONIO M. BIRD, JR.

Mailing Address 24 MAPLEWOOD ROAD

City State Zip Code
ASHEVILLE NC 28804-2825

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955323

Amount of Each Receipt this Period

80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

490.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 183 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. VIVIAN BIRDSALL

Mailing Address 8204 KENSINGTON SQ

City JACKSONVILLE State FL Zip Code 32217-4401

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 01 / 2010

Transaction ID: SA11.13977510

Amount of Each Receipt this Period -100.00

CONTRIBUTION

CHARGED BACK

B. Full Name (Last, First, Middle Initial)
MS. BARBARA J. BIRTLES

Mailing Address 8801 S 700 E

City COLUMBIA CITY State IN Zip Code 46725-9257

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 376.00

Date of Receipt 10 / 18 / 2010

Transaction ID: SA11.13933046

Amount of Each Receipt this Period 151.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WILLIAM F. BISCHOFF, JR.

Mailing Address 15 ANDERSON RD

City CLINTON State NJ Zip Code 08809-1048

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 20 / 2010

Transaction ID: SA11.13944746

Amount of Each Receipt this Period 200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 251.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 184 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RALPH J. BISEK

Mailing Address 601 LAKE ORIENTA DRIVE

City State Zip Code
ALTAMONTE SPRINGS FL 32701-6307

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
10 / 27 / 2010

Transaction ID: SA11.13955680

Amount of Each Receipt this Period
CONTRIBUTION 20.00

B. Full Name (Last, First, Middle Initial)
MR. DANNY D. BISHOP

Mailing Address 5266 MCGAVOCK ROAD

City State Zip Code
BRENTWOOD TN 37027-5196

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
THE ADAM GROUP PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2010

Transaction ID: SA11.13962637

Amount of Each Receipt this Period
CONTRIBUTION 420.00

C. Full Name (Last, First, Middle Initial)
MR. GUY E. BISHOP, JR.

Mailing Address 4468 DRUM CASTLE COURT

City State Zip Code
VIRGINIA BEACH VA 23455-6136

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13940375

Amount of Each Receipt this Period
CONTRIBUTION 40.00

SUBTOTAL of Receipts This Page (optional) ► 480.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 185 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. LUTHER A. BISHOP

Mailing Address 1102 CENTER ST

City State Zip Code
MILFORD OH 45150-1327

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PARSON BISHOP SERVICES PRESIDENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954007

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. GEORGE C. BITTING

Mailing Address 120 SACHUEST WAY

City State Zip Code
MIDDLETOWN RI 02842-5755

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
OMI PRODUCING INC. BUSINESS MAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13965259

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
JOHN BLOCKSOM

Mailing Address 3740 HIAWATHA TRL.

City State Zip Code
NATIONAL CITY MI 48748-9681

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TAWAS ST. JOSEPH'S HOSPITAL PHYSICIAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 245.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935262

Amount of Each Receipt this Period

105.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

305.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 186 / 3187
(check only one)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. ANNA R. BLACK

Mailing Address 900 E. CONNELL STREET

City State Zip Code
BRECKENRIDGE TX 76424-2410

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
11 / 17 / 2010

Transaction ID: SA11.13969860

Amount of Each Receipt this Period
CONTRIBUTION 50.00

B. Full Name (Last, First, Middle Initial)
MR. DAVID BLACK

Mailing Address 819 PLANTATION BOULEVARD

City State Zip Code
GALLATIN TN 37066-4497

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AEGIS SCIENCES TOXICOLOGIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 19600.00

Date of Receipt
MM / DD / YYYY
10 / 27 / 2010

Transaction ID: SA11.13959347

Amount of Each Receipt this Period
CONTRIBUTION 19600.00

C. Full Name (Last, First, Middle Initial)
MR. DAVID H. BLACKHAM

Mailing Address 1 W MAIN ST

City State Zip Code
MT PLEASANT UT 84647-1327

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SKYLINE PHARMACY PHARMACIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2010

Transaction ID: SA11.13951345

Amount of Each Receipt this Period
CONTRIBUTION 300.00

SUBTOTAL of Receipts This Page (optional) ► 19950.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 187 / 3187
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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. DIANE BLACK

Mailing Address 819 PLANTATION BOULEVARD

City State Zip Code
GALLATIN TN 37066-4497

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
US CONGRESS MEMBER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 27 / 2010

Transaction ID: SA11.13959346

Amount of Each Receipt this Period
30400.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN T. BLACK

Mailing Address 409 SUNSET DRIVE

City State Zip Code
BIRMINGHAM AL 35216-1545

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 19 / 2010

Transaction ID: SA11.13941834

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOSEPH S. BLACK

Mailing Address 858 PINEY WOODS DR

City State Zip Code
LAGRANGE GA 30240-2020

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 21 / 2010

Transaction ID: SA11.13942925

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 30700.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JUSTIN BLACKBURN
Mailing Address 4073 N ARBOR LN
City BUCKEYE State AZ Zip Code 85396-3603
FEC ID number of contributing federal political committee. **C**
Name of Employer WELLS FARGO Occupation ENGINEER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00
Date of Receipt 10 / 15 / 2010
Transaction ID: SA11.13928033
Amount of Each Receipt this Period 210.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. CARRIE F. BLADES
Mailing Address 14226 BLOOMINGDALE MANOR
City CYPRESS State TX Zip Code 77429-8181
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation PHYSICIAN
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00
Date of Receipt 10 / 28 / 2010
Transaction ID: SA11.13958250
Amount of Each Receipt this Period 5000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CHARLES M. BLAIR
Mailing Address 706 ROSS HILL RD
City GAFFNEY State SC Zip Code 29341-5136
FEC ID number of contributing federal political committee. **C**
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 265.00
Date of Receipt 10 / 20 / 2010
Transaction ID: SA11.13938575
Amount of Each Receipt this Period 45.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 5255.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM S. BLAIR, JR.
Mailing Address 1451 SHADY COVE LANE

City State Zip Code
LAWRENCEVILLE GA 30043-5241

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918723
Amount of Each Receipt this Period 85.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM S. BLAIR, JR.
Mailing Address 1451 SHADY COVE LANE

City State Zip Code
LAWRENCEVILLE GA 30043-5241

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935046
Amount of Each Receipt this Period 50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM S. BLAIR, JR.
Mailing Address 1451 SHADY COVE LANE

City State Zip Code
LAWRENCEVILLE GA 30043-5241

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937744
Amount of Each Receipt this Period 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 185.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 190 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. DONALD L. BLAKE		Date of Receipt
	Mailing Address 4489 NEWTON RD.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 8 / 2 0 1 0
	City	State	Zip Code
	NEWARK	OH	43055-9641
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13935003
Name of Employer ARMOR SOURCE		Occupation BUSINESS OWNER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	<input type="text"/> 100.00
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MRS. EVAMARIE V. BLAKE		Date of Receipt
	Mailing Address 7801 LOS PINOS BOULEVARD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 8 / 2 0 1 0
	City	State	Zip Code
	CORAL GABLES	FL	33143-6451
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13937485
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 255.00	<input type="text"/> 100.00
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) DR. JOHN A. BLANCHARD		Date of Receipt
	Mailing Address 1200 OVERLOOK DR. APT. 238		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 1 / 2 0 1 0
	City	State	Zip Code
	LAKE OSWEGO	OR	97034-6647
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13942897
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	<input type="text"/> 50.00
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 250.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 191 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. JOHN A. BLANCHARD

Mailing Address 1200 OVERLOOK DR. APT. 238

City State Zip Code
LAKE OSWEGO OR 97034-6647

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946275

Amount of Each Receipt this Period
20.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. T. EUGENE BLANCHARD

Mailing Address 2509 AUGUSTA DR.

City State Zip Code
NAPLES FL 34109-3347

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934854

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. BETTY G. BLANK

Mailing Address 3719 PRAIRIE DUNES DR

City State Zip Code
SARASOTA FL 34238-2854

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 377.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941956

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 2045.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 192 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. BETTY G. BLANK

Mailing Address 3719 PRAIRIE DUNES DR

City State Zip Code
SARASOTA FL 34238-2854

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
377.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957290

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RANDY J. BLANKENSHIP

Mailing Address 714 TERRYLAND DR

City State Zip Code
RICHARDSON TX 75080-4116

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 1 0

Transaction ID: SA11.13965588

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. RUTH A. BLANKSHAIN

Mailing Address 3628 WILDERNESS BLVD. W

City State Zip Code
PARRISH FL 34219-9349

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
401.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946773

Amount of Each Receipt this Period
151.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **451.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 193 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. SARAH BLANTON

Mailing Address 2092 S SHERWOOD DR APT B15

City VALDOSTA State GA Zip Code 31602-2276

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13938331
 Amount of Each Receipt this Period: 75.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RICHARD H. BLASE

Mailing Address 9500 HOWARD ROAD

City LEES SUMMIT State MO Zip Code 64086-9567

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 11 / 02 / 2010
Transaction ID: SA11.13964841
 Amount of Each Receipt this Period: 50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MARTIN C. BLAYLOCK

Mailing Address 11317 MOSLEY LN.

City SAINT LOUIS State MO Zip Code 63141-7528

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13944436
 Amount of Each Receipt this Period: 105.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 230.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 194 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. CHARLES E. BLEAKLEY

Mailing Address 68 LE MANS CT

City	State	Zip Code
SHAWNEE MSN	KS	66208-5232

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation REAL ESTATE DEVELOPER
-----------------------------------	-------------------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941584

Amount of Each Receipt this Period

101.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. LEE BLEDSOE

Mailing Address 161 DEER HOLLOW RD

City	State	Zip Code
SAN ANSELMO	CA	94960-1246

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Transaction ID: SA11.13967730

Amount of Each Receipt this Period

300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. ROBERT BLEDSOE

Mailing Address 8520 GARDENA RD

City	State	Zip Code
LAKESIDE	CA	92040-5603

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957371

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

501.00

TOTAL This Period (last page this line number only) ►

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**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 195 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM E. BLEDSOE

Mailing Address P.O. BOX 186

City State Zip Code
HUGO CO 80821-0186

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation RANCHER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13933535

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAVID J. BLESSING

Mailing Address 26279 ROGELL RD.

City State Zip Code
NEW BOSTON MI 48164-9212

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 201.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13933309

Amount of Each Receipt this Period

51.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID J. BLESSING

Mailing Address 26279 ROGELL RD.

City State Zip Code
NEW BOSTON MI 48164-9212

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 201.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	6	/	2	0	1	0

Transaction ID: SA11.13969199

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

201.00

TOTAL This Period (last page this line number only) ►

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 196 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RICHARD B. BLESSEY

Mailing Address 566 DANBURY ROAD

City State Zip Code
BROOKFIELD CT 06804

FEC ID number of contributing federal political committee. **C**

Name of Employer ALISINE METAL PRODS CORP Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948560

Amount of Each Receipt this Period
101.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WELTON W. BLESSING

Mailing Address 3601 GUILDERLAND AVENUE

City State Zip Code
SCHENECTADY NY 12306-1811

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956986

Amount of Each Receipt this Period
60.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. MARK B. BLICK

Mailing Address 6565 WEST LOOP S # 300

City State Zip Code
BELLAIRE TX 77401-3505

FEC ID number of contributing federal political committee. **C**

Name of Employer MARK BLICK Occupation DOCTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928930

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 661.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 197 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. EMILY J. BLISS
Mailing Address 1307 TROON WAY
City State Zip Code
ROCKLEDGE FL 32955-2244
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
RETIRED RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00
Date of Receipt: 10 / 27 / 2010
Transaction ID: SA11.13958537
Amount of Each Receipt this Period: 26.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. EMILY J. BLISS
Mailing Address 1307 TROON WAY
City State Zip Code
ROCKLEDGE FL 32955-2244
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
RETIRED RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00
Date of Receipt: 11 / 10 / 2010
Transaction ID: SA11.13967664
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. TERENCE E. BLOCK
Mailing Address 1 SQUIRES LN.
City State Zip Code
SAINT LOUIS MO 63131-4811
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
NESTLE PURINA EXECUTIVE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00
Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13941600
Amount of Each Receipt this Period: 121.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 172.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 198 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
INGEBORG BLOMBERG

Mailing Address 630 HIGHWAY N14 APT 203

City State Zip Code
ALBERT CITY IA 50510-1221

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	1	0

Transaction ID: SA11.13960625

Amount of Each Receipt this Period
55.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
INGEBORG BLOMBERG

Mailing Address 630 HIGHWAY N14 APT 203

City State Zip Code
ALBERT CITY IA 50510-1221

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	4	/	2	0	1	0

Transaction ID: SA11.13965549

Amount of Each Receipt this Period
55.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN BLOOM

Mailing Address 9472 DOUBLE EAGLE LN

City State Zip Code
MARSHALL VA 20115-2489

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	5	/	2	0	1	0

Transaction ID: SA11.13928123

Amount of Each Receipt this Period
110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **220.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 199 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MARGARET V. BLOSS

Mailing Address 415 CAMINO REAL AVE

City State Zip Code
EL PASO TX 79922-2003

FEC ID number of contributing federal political committee. **C**

Name of Employer
SELF-EMPLOYED Occupation
HORSE BREEDER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
440.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13964171

Amount of Each Receipt this Period
70.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MARGARET V. BLOSS

Mailing Address 415 CAMINO REAL AVE

City State Zip Code
EL PASO TX 79922-2003

FEC ID number of contributing federal political committee. **C**

Name of Employer
SELF-EMPLOYED Occupation
HORSE BREEDER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
440.00

Date of Receipt
MM / DD / YYYY
11 / 12 / 2010

Transaction ID: SA11.13968278

Amount of Each Receipt this Period
60.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. KATHERINE BLUMBERG

Mailing Address 9 COSSART MANOR RD

City State Zip Code
CHADDS FORD PA 19317-9395

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER BEST EFFORTS Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13941897

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **230.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 200 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ROE C. BLUME

Mailing Address 10 CHESTNUT RD.

City State Zip Code
WILMINGTON DE 19810-2904

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 445.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937617

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ROE C. BLUME

Mailing Address 10 CHESTNUT RD.

City State Zip Code
WILMINGTON DE 19810-2904

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 445.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13960715

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. DOLORES A. BLUMHORST

Mailing Address 1404 REYNOLDS RD

City State Zip Code
MARSHALL MO 65340-9719

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 395.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930557

Amount of Each Receipt this Period

20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

240.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 201 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. DOLORES A. BLUMHORST

Mailing Address 1404 REYNOLDS RD

City State Zip Code
MARSHALL MO 65340-9719

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 395.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943637

Amount of Each Receipt this Period
15.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. DOLORES A. BLUMHORST

Mailing Address 1404 REYNOLDS RD

City State Zip Code
MARSHALL MO 65340-9719

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 395.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954059

Amount of Each Receipt this Period
20.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. DOLORES A. BLUMHORST

Mailing Address 1404 REYNOLDS RD

City State Zip Code
MARSHALL MO 65340-9719

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 395.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961735

Amount of Each Receipt this Period
20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **55.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 202 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. DOLORES A. BLUMHORST

Mailing Address 1404 REYNOLDS RD

City State Zip Code
MARSHALL MO 65340-9719

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 395.00

Date of Receipt
MM / DD / YYYY
11 / 22 / 2010

Transaction ID: SA11.13972934

Amount of Each Receipt this Period
10.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. NORMAN BOCK

Mailing Address 5110 SAN FELIPE ST UNIT 231W

City State Zip Code
HOUSTON TX 77056-3664

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13931702

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. JOYCE M. BOCKEMUEHL

Mailing Address 4800 N. HARSDALE

City State Zip Code
BLOOMFIELD MI 48302-2411

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
MM / DD / YYYY
10 / 17 / 2010

Transaction ID: SA11.13928746

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 210.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 203 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JOHN BODALE

Mailing Address 100 ARAGONA BLVD
STE 101

City State Zip Code
VIRGINIA BCH VA 23462-2752

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EURO CABINETS OWNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13964429

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
HANNS BODEWIG

Mailing Address 277NW 38 WAY

City State Zip Code
DEERFIELD BEACH FL 33442

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED ARCHITECT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13951069

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. BERTHA C. BOELTER

Mailing Address P.O. BOX 22

City State Zip Code
BRISTOW NE 68719-0022

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946684

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

325.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 204 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. FRANK F. BOESHART

Mailing Address 911 SHANNON DR.

City State Zip Code
JEFFERSON SD 57038-2002

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
241.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 25 / 2010

Transaction ID: SA11.13953586

Amount of Each Receipt this Period
51.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. FRANK F. BOESHART

Mailing Address 911 SHANNON DR.

City State Zip Code
JEFFERSON SD 57038-2002

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
241.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 27 / 2010

Transaction ID: SA11.13958439

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CHARLES BOGER

Mailing Address 9782 SE TOP O SCOTT ST.

City State Zip Code
HAPPY VALLEY OR 97086-2637

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 16 / 2010

Transaction ID: SA11.13968507

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **151.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 205 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. RICHARD D. BOGERT		Date of Receipt
	Mailing Address 13933 QUAIL POINTE DRIVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 2 / 2 0 1 0
	City	State	Zip Code
	OKLAHOMA CITY	OK	73134-1002
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13951129
Name of Employer BOGO ENERGY CORPORATION		Occupation OWNER OIL AND GAS COMPANY	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	<input type="text"/> 500.00
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) MR. E JACKSON BOGGS		Date of Receipt
	Mailing Address 3105 W PROSPECT ROAD		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 2 / 2 0 1 0
	City	State	Zip Code
	TAMPA	FL	33629-5205
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13948322
Name of Employer FOWLER, WHITE, BOGGS		Occupation LAWYER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	<input type="text"/> 200.00
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) MR. LYNN BOGH		Date of Receipt
	Mailing Address 13861 MUSTARD SEED DR		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 0 / 2 0 1 0
	City	State	Zip Code
	YUCAIPA	CA	92399-7049
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13938563
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 510.00	<input type="text"/> 510.00
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1210.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 206 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. GERALD W. BOGNAR

Mailing Address 11546 MANTUA CENTER ROAD
R

City MANTUA State OH Zip Code 44255

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931539

Amount of Each Receipt this Period
80.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
BETTY L. BOHAC

Mailing Address 1111 LONGHORN DR

City NORFOLK State NE Zip Code 68701-2575

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
362.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928822

Amount of Each Receipt this Period
110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. RICHARD A. BOHANNEN

Mailing Address 160 DORADO TER
SUITE 504

City SAN FRANCISCO State CA Zip Code 94112-1743

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
470.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950089

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **240.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 207 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MS. MILBIE BOHNERT</p> <p>Mailing Address 200 WESTON ROAD RR 1 BOX 78</p> <p>City State Zip Code COMFORT TX 78013-3224</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 212.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 19 / 2010</p> <p>Transaction ID: SA11.13941650</p> <p>Amount of Each Receipt this Period 36.00</p> <p>CONTRIBUTION</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) MS. MILBIE BOHNERT</p> <p>Mailing Address 200 WESTON ROAD RR 1 BOX 78</p> <p>City State Zip Code COMFORT TX 78013-3224</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 212.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 26 / 2010</p> <p>Transaction ID: SA11.13957292</p> <p>Amount of Each Receipt this Period 50.00</p> <p>CONTRIBUTION</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) MR. VICTOR V. BOKUMS</p> <p>Mailing Address 19708 SUNSHINE WAY</p> <p>City State Zip Code BEND OR 97702-1984</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 701.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 25 / 2010</p> <p>Transaction ID: SA11.13953564</p> <p>Amount of Each Receipt this Period 101.00</p> <p>CONTRIBUTION</p>
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SUBTOTAL of Receipts This Page (optional)	187.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 208 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
FRANCESCA BOLAND

Mailing Address 7501 COVEY RD.

City State Zip Code
FORESTVILLE CA 95436-9590

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DUNGARUIN, CA PROGRAM COUNSELOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940811

Amount of Each Receipt this Period

55.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
FRANCESCA BOLAND

Mailing Address 7501 COVEY RD.

City State Zip Code
FORESTVILLE CA 95436-9590

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DUNGARUIN, CA PROGRAM COUNSELOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941547

Amount of Each Receipt this Period

40.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
FRANCESCA BOLAND

Mailing Address 7501 COVEY RD.

City State Zip Code
FORESTVILLE CA 95436-9590

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DUNGARUIN, CA PROGRAM COUNSELOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954691

Amount of Each Receipt this Period

40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

135.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 209 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
LOIS BOLAND

Mailing Address 19855 SW TOUCHMARK WAY UNIT 10

City State Zip Code
BEND OR 97702-1949

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953257

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILLIAM R. BOLING

Mailing Address 4732 ALGON QUEEN AVE

City State Zip Code
JACKSONVILLE FL 32210-7606

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943442

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. BASTIAAN BOLL

Mailing Address 5 LYNNAH WAY

City State Zip Code
OKATIE SC 29909-4403

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
383.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959736

Amount of Each Receipt this Period
63.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **363.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 210 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. JUDY BOLL

Mailing Address 19545 DORCHESTER DR

City State Zip Code
BROOKFIELD WI 53045-6203

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
440.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13942568

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. GEORGE L. BOLLER

Mailing Address 36270 HAMMER LANE

City State Zip Code
LIVONIA MI 48152-2759

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED
Occupation PATENT ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13954420

Amount of Each Receipt this Period
110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
PETER N. BOLLENBECKER

Mailing Address 490 TERRACES CT

City State Zip Code
MESQUITE NV 89027-3736

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
266.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13933310

Amount of Each Receipt this Period
56.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **266.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 211 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ROY B. BOLTHOUSE
Mailing Address 1645 LINCOLN ST
City MARNE State MI Zip Code 49435-9627
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13934629
Amount of Each Receipt this Period 25.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JEFFREY M. BOLTON
Mailing Address 2304 ARBOR TRL
City COLLEYVILLE State TX Zip Code 76034-5034
FEC ID number of contributing federal political committee. **C**
Name of Employer FUJITSU Occupation SALES
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 10 / 20 / 2010
Transaction ID: SA11.13938802
Amount of Each Receipt this Period 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. JOY BOMAR
Mailing Address 5865 HAYMARKET RD.
City MEMPHIS State TN Zip Code 38120-3032
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt 10 / 20 / 2010
Transaction ID: SA11.13943526
Amount of Each Receipt this Period 75.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 200.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 212 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. SCOTT BOMMER

Mailing Address 50 CENTRAL PARK SOUTH

City State Zip Code
NEW YORK NY 10019-1613

FEC ID number of contributing federal political committee. **C**

Name of Employer
SAB CAPITAL MANAGEMENT

Occupation
EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
30400.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 27 / 2010

Transaction ID: SA11.13955979

Amount of Each Receipt this Period

30400.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. WILLIAM J. BONACCI

Mailing Address 1919 MARS ROAD

City State Zip Code
LIVERMORE CA 94550-6310

FEC ID number of contributing federal political committee. **C**

Name of Employer
CCCCCD

Occupation
TEACHER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 19 / 2010

Transaction ID: SA11.13940026

Amount of Each Receipt this Period

35.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. WILLIAM J. BONACCI

Mailing Address 1919 MARS ROAD

City State Zip Code
LIVERMORE CA 94550-6310

FEC ID number of contributing federal political committee. **C**

Name of Employer
CCCCCD

Occupation
TEACHER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 25 / 2010

Transaction ID: SA11.13953534

Amount of Each Receipt this Period

35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

30470.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 213 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. FRANK BOND

Mailing Address 6339 BUNKER CIR.

City ROANOKE State VA Zip Code 24019-6101

FEC ID number of contributing federal political committee. **C**

Name of Employer ARCS PLC Occupation ST CONST/NSPR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA11.13928280
 Amount of Each Receipt this Period: 35.00
 CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. FRANK BOND

Mailing Address 6339 BUNKER CIR.

City ROANOKE State VA Zip Code 24019-6101

FEC ID number of contributing federal political committee. **C**

Name of Employer ARCS PLC Occupation ST CONST/NSPR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA11.13928523
 Amount of Each Receipt this Period: 10.00
 CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. FRANK BOND

Mailing Address 6339 BUNKER CIR.

City ROANOKE State VA Zip Code 24019-6101

FEC ID number of contributing federal political committee. **C**

Name of Employer ARCS PLC Occupation ST CONST/NSPR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13940839
 Amount of Each Receipt this Period: 20.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 65.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 214 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. FRANK BOND	Date of Receipt MM / DD / YYYY 10 / 29 / 2010
	Mailing Address 6339 BUNKER CIR.	Transaction ID: SA11.13962317
	City State Zip Code ROANOKE VA 24019-6101	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer ARCS PLC Occupation ST CONST/NSPR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 245.00	

B.	Full Name (Last, First, Middle Initial) MR. FRANK BOND	Date of Receipt MM / DD / YYYY 11 / 18 / 2010
	Mailing Address 6339 BUNKER CIR.	Transaction ID: SA11.13969817
	City State Zip Code ROANOKE VA 24019-6101	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer ARCS PLC Occupation ST CONST/NSPR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 245.00	

C.	Full Name (Last, First, Middle Initial) MR. RICHARD BONDS	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 24102 VIA MADRUGADA	Transaction ID: SA11.13952908
	City State Zip Code MISSION VIEJO CA 92692-1907	Amount of Each Receipt this Period 110.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 570.00	

SUBTOTAL of Receipts This Page (optional)	▶	145.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 215 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. KATHERINE A. BONHAM

Mailing Address 703 W HERBERT AVE # 118
118

City State Zip Code
REEDLEY CA 93654

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956993

Amount of Each Receipt this Period
20.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. RUTH E. BONHAM

Mailing Address 950 SUNSET GARDEN LN APT 240

City State Zip Code
SIMI VALLEY CA 93065-8383

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 596.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944722

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RON BONJA

Mailing Address 27331 SANTA CLARITA RD.

City State Zip Code
SANTA CLARITA CA 91350-1317

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SANGUS UNION SCHOOL DISTRICT TEACHER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952947

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 220.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 216 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MR. BARTON BONNER</p> <p>Mailing Address 1268 CORONADO ST</p> <hr/> <p>City State Zip Code UPLAND CA 91786-2101</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 220.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 14 / 2010</p> <p>Transaction ID: SA11.13918653</p> <p>Amount of Each Receipt this Period 50.00</p> <p>CONTRIBUTION</p>
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<p>B. Full Name (Last, First, Middle Initial) MR. BARTON BONNER</p> <p>Mailing Address 1268 CORONADO ST</p> <hr/> <p>City State Zip Code UPLAND CA 91786-2101</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 220.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 11 / 22 / 2010</p> <p>Transaction ID: SA11.13971757</p> <p>Amount of Each Receipt this Period 20.00</p> <p>CONTRIBUTION</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) MR. DAVID BONNER</p> <p>Mailing Address 1721 SHIRLEY AVE.</p> <hr/> <p>City State Zip Code HAMILTON OH 45011-1853</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 353.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 25 / 2010</p> <p>Transaction ID: SA11.13952392</p> <p>Amount of Each Receipt this Period 50.00</p> <p>CONTRIBUTION</p>
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SUBTOTAL of Receipts This Page (optional)	120.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 217 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. DEBORAH P. BONNER

Mailing Address 539 TROY RD

City State Zip Code
PARSIPPANY NJ 07054-2927

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951318

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. ETHEL G. BONNER

Mailing Address 1224 VILLAGE CREEK LN APT P4

City State Zip Code
MOUNT PLEASANT SC 29464-3162

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
RETIRED

Aggregate Year-to-Date ▼
2650.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956718

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. TIM M. BONTECOU

Mailing Address 4754 ROUTE 44

City State Zip Code
MILLBROOK NY 12545-4968

FEC ID number of contributing federal political committee. **C**

Name of Employer
TAMARACK PRESERVE LIMITED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
PRESIDENT

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942564

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

800.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 218 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. SALLIE S. BOORD

Mailing Address P.O. BOX 42819

City State Zip Code
CINCINNATI OH 45242-0819

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	1	0

Transaction ID: SA11.13938497

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. HERBERT M. BOOTH

Mailing Address 54 BURGETT DR

City State Zip Code
HOMER NY 13077-1018

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	1	0

Transaction ID: SA11.13942236

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. MODLETA L. BOOTH

Mailing Address 3103 WOODRIDGE DR

City State Zip Code
PITTSBURGH PA 15227-1017

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	1	0

Transaction ID: SA11.13963818

Amount of Each Receipt this Period
75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **225.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 219 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. NANCY BOOTHE

Mailing Address 151 GRASSMARKET

City State Zip Code
SAN ANTONIO TX 78259-2265

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt
MM / DD / YYYY
11 / 18 / 2010

Transaction ID: SA11.13971269

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
EDWARD BORATKO

Mailing Address 6106 WALKERS PARK DRIVE

City State Zip Code
SUGAR LAND TX 77479-5818

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SCHLUMBERGER ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
10 / 28 / 2010

Transaction ID: SA11.13960201

Amount of Each Receipt this Period
150.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. KENNETH E. BORCHERS

Mailing Address 1303 COMANCHE DR

City State Zip Code
RICHARDSON TX 75080-3712

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 592.00

Date of Receipt
MM / DD / YYYY
10 / 14 / 2010

Transaction ID: SA11.13930266

Amount of Each Receipt this Period
101.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 301.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 220 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) LOUIS L. BORICK	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 920 FOOTHILL RD.	Transaction ID: SA11.13946319
	City State Zip Code BEVERLY HILLS CA 90210-2926	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1250.00		

B.	Full Name (Last, First, Middle Initial) DENNIS BORING	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 6665 KIMESVILLE RD	Transaction ID: SA11.13946206
	City State Zip Code LIBERTY NC 27298-9108	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SELF-EMPLOYED Occupation ATTORNEY Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00		

C.	Full Name (Last, First, Middle Initial) MR. JOHN W. BORING	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 3510 W MONADAN DR	Transaction ID: SA11.13936958
	City State Zip Code CHARLOTTESVILLE VA 22901-1030	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 280.00		

SUBTOTAL of Receipts This Page (optional)	▶	400.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 221 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
PAUL BORK

Mailing Address 61 AZALEA RD.

City State Zip Code
SHARON MA 02067-3213

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FOLEY HOAG LLP ATTORNEY

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940748

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. WAYNE BORKOWSKI

Mailing Address 1655 SPINNAKER LANE

City State Zip Code
HANOVER PARK IL 60133-6240

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ALPINE HGTH & CO. HVAC CONTRACTOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 335.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940666

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. WAYNE BORKOWSKI

Mailing Address 1655 SPINNAKER LANE

City State Zip Code
HANOVER PARK IL 60133-6240

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ALPINE HGTH & CO. HVAC CONTRACTOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 335.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13942006

Amount of Each Receipt this Period

20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

220.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 222 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. DELORIS M. BORWN

Mailing Address 20802 PINE OAK LANE

City State Zip Code
HOCKLEY TX 77447-8705

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
11 / 15 / 2010

Transaction ID: SA11.13968867

Amount of Each Receipt this Period
150.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ANDREW BOSZHARDT

Mailing Address 660 MADISON AVENUE
14TH FLOOR

City State Zip Code
NEW YORK NY 10065

FEC ID number of contributing federal political committee. **C**

Name of Employer GREAT OAKS CAPITAL MANAGEMENT, LLC
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2010

Transaction ID: SA11.13928008

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. ROBERTA BOTENS

Mailing Address 14157 E. VIA DEL ABRIGO

City State Zip Code
VAIL AZ 85641-2054

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED
Occupation INTERIOR DESIGNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13935265

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1200.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 223 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GEORGE BOULLIANNE

Mailing Address 120 CONVOY ST

City State Zip Code
PLAYA DEL REY CA 90293-7663

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952213

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RANDY L. BOURDEAU

Mailing Address 6426 COTTLE RD.

City State Zip Code
SAN JOSE CA 95123-5630

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation REAL ESTATE APPRAISER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 293.95

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 8 / 2 0 1 0

Transaction ID: SA11.13966592

Amount of Each Receipt this Period
1.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT V. BOURIE

Mailing Address 154 SKYLINE DR.

City State Zip Code
CORAM NY 11727-3616

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 491.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932538

Amount of Each Receipt this Period
251.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **502.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 224 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JOAN K. BOWDEN

Mailing Address 428 BEACHSIDE PL.

City State Zip Code
FERNANDINA FL 32034-6544

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13955036

Amount of Each Receipt this Period
175.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
REV. LLOYD M. BOWDEN

Mailing Address 115 N. MAY ST.

City State Zip Code
JOLIET IL 60435-7340

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13935455

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN ALEXANDER BOWE

Mailing Address 2135 SPRINGWATER LN.

City State Zip Code
PORT ORANGE FL 32128-7426

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 296.00

Date of Receipt
MM / DD / YYYY
10 / 14 / 2010

Transaction ID: SA11.13930257

Amount of Each Receipt this Period
51.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **426.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 225 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JOHN ALEXANDER BOWE

Mailing Address 2135 SPRINGWATER LN.

City State Zip Code
PORT ORANGE FL 32128-7426

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 296.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13972837

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JOHN P. BOWER

Mailing Address 210 TOWN CENTER DR

City State Zip Code
TROY MI 48084-1774

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13964441

Amount of Each Receipt this Period

400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ROBERT BOWIE

Mailing Address P.O. BOX 697

City State Zip Code
HOTCHKISS CO 81419-0697

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952836

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 226 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) JOHN D. BOWMAN	Date of Receipt MM / DD / YYYY 11 / 02 / 2010
	Mailing Address 11 STATE HWY 207	Transaction ID: SA11.13962632
	City State Zip Code FLOYDADA TX 79235	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 655.00	

B.	Full Name (Last, First, Middle Initial) MR. STEPHEN BOWMAN	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 385 VISTA GRANDE	Transaction ID: SA11.13954813
	City State Zip Code GREENBRAE CA 94904-1138	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) MR. STEPHEN BOWMAN	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 385 VISTA GRANDE	Transaction ID: SA11.13956389
	City State Zip Code GREENBRAE CA 94904-1138	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	450.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 227 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
SUZANNE M. BOWMAN

Mailing Address P.O. BOX 2566

City State Zip Code
WALDORF MD 20604-2566

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13964377

Amount of Each Receipt this Period

35.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. SUZANNA E. BOYD

Mailing Address 622 VIA DEL CAMPO

City State Zip Code
SAN MARCOS CA 92078-5097

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
RETIRED

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13960718

Amount of Each Receipt this Period

160.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
ROBERT R. BOYDSTON

Mailing Address 1356 W COWLES ST.

City State Zip Code
LONG BEACH CA 90813-2735

FEC ID number of contributing federal political committee. **C**

Name of Employer
SCALE PLACE INC

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
SCALE TECH/MGR

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941524

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

445.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 228 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
SHARON MARIE BOYLES

Mailing Address P.O. BOX 7169

City State Zip Code
BRANSON MO 65615-7169

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 206.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933006

Amount of Each Receipt this Period
6.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WAYNE BOYLES

Mailing Address 5811 WESSEX LANE

City State Zip Code
ALEXANDRIA VA 22310-1428

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DEPARTMENT OF ENERGY FEDERAL GOVERNMENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13957676

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. CHARLOTTE A. BOYTOR-LOWERY

Mailing Address 19790 GRANT STREET

City State Zip Code
CORONA CA 92881-4215

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13928549

Amount of Each Receipt this Period
75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **181.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 229 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. EDITH M. BRADBURY

Mailing Address 318 W 4TH. ST.

City State Zip Code
STANBERRY MO 64489-1124

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13951939

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. A. D. BRADFORD

Mailing Address 16206 BARKLEA RD

City State Zip Code
CYPRESS TX 77429-1606

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.44

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929596

Amount of Each Receipt this Period
35.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
JEANNE BRADFORD

Mailing Address 42161 SANTA FE TRL.

City State Zip Code
MURRIETA CA 92562-5228

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952787

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **175.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 230 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. CORNELIUS BRADLEY

Mailing Address 25735 274TH. ST.

City State Zip Code
LA MOTTE IA 52054-9587

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 440.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959570

Amount of Each Receipt this Period

30.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JERRY B. BRADLEY

Mailing Address 1404 BALLYCASTLE LN.

City State Zip Code
CORINTH TX 76210-3087

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13972811

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. MICHAEL J. BRADLEY

Mailing Address 723 S PINE ST

City State Zip Code
RICHMOND VA 23220-6518

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
VA HOSPITALISTS, INC/HCA HOSPITALIST/INTERNIST

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 510.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935202

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

230.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 231 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. NANCY WEYL BRADLEY

Mailing Address 1330 MERCER LN.

City State Zip Code
MC LEAN VA 22101-3014

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED WRITER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 476.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13964418

Amount of Each Receipt this Period

80.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
CYNTHIA BRADSHAW

Mailing Address 914 HOMESTAKE DR

City State Zip Code
GOLDEN CO 80401-1772

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MILLERCOORS, LLC CUSTOMER SERVICE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 255.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928300

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. ROSAMOND STRONG BRADSHAW

Mailing Address 55 CATHEDRAL ROCK DR. UNIT 58

City State Zip Code
SEDONA AZ 86351-8629

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1651.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940967

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

380.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 232 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. EDMOND P. BRADY

Mailing Address 17 STONEBRIDGE RD

City State Zip Code
SPARTA NJ 07871-3151

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MCENERNEY BRADY & CO CPA

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944524

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DR. KEVIN T. BRADY

Mailing Address 1514 KINGS HWY

City State Zip Code
SWEDESBORO NJ 08085-1212

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PRESIDENT CEO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961815

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
RANDY BRADY

Mailing Address 4802 MCCARTY BLVD. APT. 220

City State Zip Code
AMARILLO TX 79110-2340

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
B&W PANTEX UTILITY OPERATOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930025

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 233 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. SEAN THOMAS BRADY

Mailing Address 11 MADISON AVENUE

City State Zip Code
NEW YORK NY 10010-3643

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CREDIT SUISSE BANKING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959408

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILLIAM BRADY

Mailing Address P.O. BOX 1466

City State Zip Code
CARTHAGE NC 28327-1466

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949688

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM A. BRADY

Mailing Address 6246 BOOTLEGGERS ROAD

City State Zip Code
MARSHALL VA 20115-2435

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959161

Amount of Each Receipt this Period
160.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 2260.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 234 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JAMES W. BRAHAM

Mailing Address 606 POPLAR CT.

City State Zip Code
PITTSBURGH PA 15238-1344

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959695

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JAMES W. BRAHAM

Mailing Address 606 POPLAR CT.

City State Zip Code
PITTSBURGH PA 15238-1344

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959774

Amount of Each Receipt this Period
1.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM J. BRAKE

Mailing Address 927 S LAKESIDE AVE

City State Zip Code
LAKELAND FL 33803-1031

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 461.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13938928

Amount of Each Receipt this Period
1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 102.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 235 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DAVID E. BRANCH

Mailing Address 1377 NATURES WAY

City PRESCOTT State AZ Zip Code 86305-5142

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13943620
 Amount of Each Receipt this Period: 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DAVID M. BRAND

Mailing Address 7 VILLAGE CIR.

City NEWTOWN SQ State PA Zip Code 19073-2927

FEC ID number of contributing federal political committee. **C**

Name of Employer TKNSA THONKPOUNCS Occupation PNGS/COO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 14 / 2010
Transaction ID: SA11.13930391
 Amount of Each Receipt this Period: 50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DUANE V. BRANDT

Mailing Address 6602 AMPTON DR

City SPRING State TX Zip Code 77379-7661

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13940891
 Amount of Each Receipt this Period: 110.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 260.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 236 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. VIRGINIA S. BRASWELL

Mailing Address 2629 BODDIE MILL POND ROAD

City State Zip Code
NASHVILLE NC 27856-9070

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 276.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949902

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
WILEY J. BRATCHER

Mailing Address 801 E GAGE AVE

City State Zip Code
MEMPHIS TN 38106-7629

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 271.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943502

Amount of Each Receipt this Period

40.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
WILEY J. BRATCHER

Mailing Address 801 E GAGE AVE

City State Zip Code
MEMPHIS TN 38106-7629

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 271.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13972877

Amount of Each Receipt this Period

41.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

131.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 237 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
CREED V. BRATTAIN

Mailing Address 530 FIR KNOLL LN. NE

City SALEM State OR Zip Code 97317-3367

FEC ID number of contributing federal political committee. **C**

Name of Employer BRATTAIN INTL. TRUCKS Occupation CHAIRMAN-CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 391.04

Date of Receipt 11 / 01 / 2010

Transaction ID: SA11.13963706

Amount of Each Receipt this Period 101.39

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. CAMILLA BRAUER

Mailing Address 11250 HUNTER DRIVE

City BRIDGETON State MO Zip Code 63044-2306

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30000.00

Date of Receipt 10 / 27 / 2010

Transaction ID: SA11.13959335

Amount of Each Receipt this Period 15000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. CAMILLA BRAUER

Mailing Address 11250 HUNTER DRIVE

City BRIDGETON State MO Zip Code 63044-2306

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30000.00

Date of Receipt 10 / 28 / 2010

Transaction ID: SA11.13961172

Amount of Each Receipt this Period 15000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 30101.39

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 238 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. STEPHEN F. BRAUER	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 11250 HUNTER DRIVE	Transaction ID: SA11.13959329
	City State Zip Code BRIDGETON MO 63044-2306	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation HUNTER ENGINEERING COMPANY CHAIRMAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20000.00	

B.	Full Name (Last, First, Middle Initial) MR. STEPHEN F. BRAUER	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 11250 HUNTER DRIVE	Transaction ID: SA11.13961173
	City State Zip Code BRIDGETON MO 63044-2306	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation HUNTER ENGINEERING COMPANY CHAIRMAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20000.00	

C.	Full Name (Last, First, Middle Initial) MR. GEORGE A. BRAUN	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 122 ESPARTA WAY	Transaction ID: SA11.13928406
	City State Zip Code SANTA MONICA CA 90402-2136	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	11000.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 239 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GREGORY BRAUN

Mailing Address 1020 YORKSHIRE DR

City State Zip Code
YARDLEY PA 19067-4585

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TODAY'S GRAPHICS SALES MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2010

Transaction ID: SA11.13951210

Amount of Each Receipt this Period
75.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GUSTAV BRAUN

Mailing Address 3104 LITTLE CREEK LANE

City State Zip Code
ALEXANDRIA VA 22309-2126

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1402.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13945705

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. ROMA J. BRAUTIGAM

Mailing Address 11077 RUNKLE RD.

City State Zip Code
SAINT PARIS OH 43072-9678

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13949331

Amount of Each Receipt this Period
20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **195.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 240 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. EDNA D. BRAXTON

Mailing Address 1515 PENN AVE
APT 302

City State Zip Code
WILKINSBURG PA 15221-2659

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
505.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954434

Amount of Each Receipt this Period
105.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WALTER BRAYMAN

Mailing Address 844 ROCKWELL LN

City State Zip Code
KANSAS CITY MO 64112-2363

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935781

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WARD BREAUX

Mailing Address P.O. BOX 888

City State Zip Code
LOREAUVILLE LA 70552-0888

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BREAUX BROTHERS ENT. INC SHIPYARDER

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940861

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1155.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 241 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

ROYCE LIONEL BREAW

Mailing Address 438 EAST LN.

City State Zip Code
KERRVILLE TX 78028-2812

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 750.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954564

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DENNIS BRECK

Mailing Address 1655 VALLEY DR.

City State Zip Code
VENICE FL 34292-4321

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930573

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. FLINT BRECKINRIDGE

Mailing Address 1623 EAST 32ND PLACE

City State Zip Code
TULSA OK 74105-2127

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957919

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

950.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 242 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WALTER O. BREDENDICK

Mailing Address 1507 E CANDLEWOOD AVE

City State Zip Code
ORANGE CA 92867-3827

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956325

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. PHYLLIS M. BREDICE

Mailing Address 3005 S LEISURE WORLD BLVD
APT 507

City State Zip Code
SILVER SPRING MD 20906-8334

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942540

Amount of Each Receipt this Period
55.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. RUTH A. BREEDING

Mailing Address 531 N 6TH STREET

City State Zip Code
DENTON MD 21629-3300

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944759

Amount of Each Receipt this Period
110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **265.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 243 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. HIDAI E. BREGU

Mailing Address 4740 N WESTERN AVE

City State Zip Code
CHICAGO IL 60625-2013

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
381.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13952410

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. HIDAI E. BREGU

Mailing Address 4740 N WESTERN AVE

City State Zip Code
CHICAGO IL 60625-2013

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
381.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	6	/	2	0	1	0

Transaction ID: SA11.13969275

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES W. BREHM

Mailing Address 175 PRAIRIE BND

City State Zip Code
N SIOUX CITY SD 57049-5168

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
211.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	1	0

Transaction ID: SA11.13963457

Amount of Each Receipt this Period
1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **76.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 244 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. REVA R. BREHM

Mailing Address 3051 RIO DOSA DR.
APT. 100

City State Zip Code
LEXINGTON KY 40509-1551

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 345.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928948

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. CARL BREITMAN

Mailing Address 400 S BURNSIDE AVE APT 7G

City State Zip Code
LOS ANGELES CA 90036-5434

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
H & B INVESTMENT MANAGEMENT

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 321.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940427

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JIM BREMER

Mailing Address 15152 SE MICHELLE DR.

City State Zip Code
CLACKAMAS OR 97015-8359

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 530.21

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963207

Amount of Each Receipt this Period

480.21

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

640.21

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 245 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DOUGLAS BRENDAMOUR

Mailing Address 6105 PARK RD.

City State Zip Code
CINCINNATI OH 45243-3417

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SMALL BUSINESS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 454.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949611

Amount of Each Receipt this Period
277.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. JUNE R. BRESCIA

Mailing Address 1108 COPPER CREEK DR

City State Zip Code
MACCLENNY FL 32063-6010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 900.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961821

Amount of Each Receipt this Period
600.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. DEAN BRESHEARS

Mailing Address 7104 COUNTY ROAD 108

City State Zip Code
FULTON MO 65251-5537

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CAPITAL EMERY PHYSICIANS PC PHYSICIAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 685.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941790

Amount of Each Receipt this Period
175.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1052.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 246 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. ANNE L. BRETTON

Mailing Address 12126 PENZANCE LN.

City State Zip Code
NEW PRT RCHY FL 34654-6310

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 435.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933505

Amount of Each Receipt this Period

20.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. ANNE L. BRETTON

Mailing Address 12126 PENZANCE LN.

City State Zip Code
NEW PRT RCHY FL 34654-6310

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 435.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953400

Amount of Each Receipt this Period

20.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. ANNE L. BRETTON

Mailing Address 12126 PENZANCE LN.

City State Zip Code
NEW PRT RCHY FL 34654-6310

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 435.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13971325

Amount of Each Receipt this Period

20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 247 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. DARRELL BRETT

Mailing Address 10101 SE MAIN STREET
SUITE 1006

City State Zip Code
PORTLAND OR 97216-2456

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SURGEON

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13951148

Amount of Each Receipt this Period
10000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAMES W. BRETT

Mailing Address 6006 VALKEITH DR

City State Zip Code
HOUSTON TX 77096-3833

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935100

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LORETTA BREUNING

Mailing Address 321 SOMERSET ROAD

City State Zip Code
PIEDMONT CA 94611-3311

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CAL STATE EAST BAY PROFESSOR EMERITUS

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942983

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **10350.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 248 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES BREWER

Mailing Address 30395 S 4540 RD

City AFTON State OK Zip Code 74331-5528

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13942842
 Amount of Each Receipt this Period: 70.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MAUREEN BREWER

Mailing Address 300 16TH ST NW

City FORT PAYNE State AL Zip Code 35967-3316

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13954357
 Amount of Each Receipt this Period: 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. FRANKLIN BRIDGES

Mailing Address 417 OAK ALLEY DRIVE

City HOUMA State LA Zip Code 70360-7957

FEC ID number of contributing federal political committee. **C**

Name of Employer OILFIELD CONSULTANTS INC. Occupation PETROLEUM ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13936957
 Amount of Each Receipt this Period: 100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 270.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 249 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. SUSAN BRIDGES

Mailing Address P.O. BOX 3484

City State Zip Code
SPARTANBURG SC 29304-3484

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SECURITY FINANCE CORPORAT- CEO OF SECURITY FINANCE CORP.
ION

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 10000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13951142

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JOHN A. BRIGGS

Mailing Address PO BOX 406

City State Zip Code
EAU CLAIRE WI 54702-0406

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SAM'S AUTO SUPPLY PRESIDENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13960755

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ROBERT A. BRIGGS

Mailing Address P.O. BOX 888

City State Zip Code
INDEPENDENCE KS 67301-0888

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED INSURANCE AGENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938605

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5135.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 250 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES R. BRIGHAM

Mailing Address 24 WATER OAK DR
SEA PINES PLANTATION

City State Zip Code
HILTON HEAD ISLAND SC 29928-3009

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935456

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PATRICK S. BRIGHTBILL

Mailing Address 340 STRAW HOLLOW ROAD

City State Zip Code
HARRISBURG PA 17112-8406

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
286.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930287

Amount of Each Receipt this Period
36.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PATRICK S. BRIGHTBILL

Mailing Address 340 STRAW HOLLOW ROAD

City State Zip Code
HARRISBURG PA 17112-8406

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
286.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954659

Amount of Each Receipt this Period
35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **121.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 251 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
ROBERT ALVAH BRIMMER

Mailing Address P.O. BOX 16506

City State Zip Code
FORT WORTH TX 76162-0506

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944479

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. GLADYS BRINKLEY

Mailing Address P.O. BOX 95

City State Zip Code
PRITCHETT CO 81064-0095

FEC ID number of contributing federal political committee. **C**

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
221.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940413

Amount of Each Receipt this Period

20.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. GLADYS BRINKLEY

Mailing Address P.O. BOX 95

City State Zip Code
PRITCHETT CO 81064-0095

FEC ID number of contributing federal political committee. **C**

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
221.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954496

Amount of Each Receipt this Period

20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

290.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 252 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial) MR. PHILIP R. BRINKERHOFF		Date of Receipt MM / DD / YYYY 10 / 26 / 2010
Mailing Address 2655 GARDEN RIDGE LN		Transaction ID: SA11.13951221
City ARLINGTON	State TX	Zip Code 76006-4030
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 70.00
Name of Employer SOUTHERN ENTERPRISE	Occupation BUSINESS EXECUTIVE	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

B.

Full Name (Last, First, Middle Initial) MR. LESLIE BRINSTER		Date of Receipt MM / DD / YYYY 10 / 15 / 2010
Mailing Address 12849 49TH ST SW		Transaction ID: SA11.13931402
City BELFIELD	State ND	Zip Code 58622-9216
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 80.00
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 295.00	

C.

Full Name (Last, First, Middle Initial) MR. LESLIE BRINSTER		Date of Receipt MM / DD / YYYY 10 / 25 / 2010
Mailing Address 12849 49TH ST SW		Transaction ID: SA11.13953162
City BELFIELD	State ND	Zip Code 58622-9216
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 295.00	

SUBTOTAL of Receipts This Page (optional)	▶	250.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 253 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DONALD BRISCOE

Mailing Address **112 OAKWOOD CT.**

City **LAKESIDE** State **TX** Zip Code **76135-4932**

FEC ID number of contributing federal political committee. **C**

Name of Employer **STAN ROBERTS & ASSOC.** Occupation **SALES**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **10 / 19 / 2010**
Transaction ID: SA11.13941132
 Amount of Each Receipt this Period **100.00**
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN B. BRISKEY

Mailing Address **425 DOCKSIDE DR UNIT 501**

City **NAPLES** State **FL** Zip Code **34110-3657**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **10 / 19 / 2010**
Transaction ID: SA11.13939017
 Amount of Each Receipt this Period **25.00**
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RYLAND G. BRISTOW

Mailing Address **P.O. BOX 5005**

City **SEVERNA PARK** State **MD** Zip Code **21146-0358**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **205.00**

Date of Receipt **10 / 14 / 2010**
Transaction ID: SA11.13930360
 Amount of Each Receipt this Period **105.00**
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **230.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 254 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
WILLIAM L. BRISTOL

Mailing Address 3156 N. CAVES VALLEY PATH

City State Zip Code
LECANTO FL 34461-9802

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945646

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. BRADLEY BRITTON

Mailing Address 13621 TANGLEWOOD DR

City State Zip Code
EDMOND OK 73013-8216

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BRITTON CLINIC ASS. OPHTHALMOLOGIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951527

Amount of Each Receipt this Period
300.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. ETHEL T. BRITTINGHAM

Mailing Address 197 FINNEGAN LN.

City State Zip Code
KENDALL PARK NJ 08824-1726

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 1 0

Transaction ID: SA11.13966060

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 440.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 255 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JOHN W. BRITTON

Mailing Address 135 EL PORTON

City State Zip Code
LOS GATOS CA 95032-1148

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930442

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. SHARON L. BRITTEN

Mailing Address 10391 I DRIVE SOUTH

City State Zip Code
CERESCO MI 49033-9727

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 294.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942949

Amount of Each Receipt this Period

39.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. CAROLYN BROCK

Mailing Address 5 BROMWICH CT

City State Zip Code
SAN ANTONIO TX 78218-6022

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 7 / 2 0 1 0

Transaction ID: SA11.13969921

Amount of Each Receipt this Period

35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

174.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 256 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
JOHN BROCK

Mailing Address 2500 WINDY RIDGE PARKWAY

City ATLANTA State GA Zip Code 30339-5677

FEC ID number of contributing federal political committee. **C**

Name of Employer COCA-COLA ENTERPRISES Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 03 / 2010

Transaction ID: SA11.13964486

Amount of Each Receipt this Period 500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. MICHAEL BROCK

Mailing Address 1806 ORCHARD COUNTRY LN.

City HOUSTON State TX Zip Code 77062-2357

FEC ID number of contributing federal political committee. **C**

Name of Employer DU PONT Occupation CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 316.00

Date of Receipt 10 / 22 / 2010

Transaction ID: SA11.13948721

Amount of Each Receipt this Period 40.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. PETER C. BROCKWAY

Mailing Address 443 ROYAL PALM WAY

City BOCA RATON State FL Zip Code 33432-7945

FEC ID number of contributing federal political committee. **C**

Name of Employer BROCKWAY MORAN & PARTNERS, INC Occupation PRIVATE EQUITY PROFESSIONAL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 12000.00

Date of Receipt 10 / 19 / 2010

Transaction ID: SA11.13942497

Amount of Each Receipt this Period 10000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 10540.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 257 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DR. TRACY BROCKMAN	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 1320 CELESTE DR	Transaction ID: SA11.13928865
	City State Zip Code MODESTO CA 95355-2402	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation FAMILY HEALTHCARE MEDICAL GROUP PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) MS. DELIA E. BRODERICK	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 3459 NW 59TH ST	Transaction ID: SA11.13955135
	City State Zip Code SEATTLE WA 98107-3352	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

C.	Full Name (Last, First, Middle Initial) MRS. LINDA BRODIE	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 400 SE 5TH AVE APT N1003	Transaction ID: SA11.13958809
	City State Zip Code BOCA RATON FL 33432-5642	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	700.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 258 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. DONNA SCOTT BRONAUGH

Mailing Address 10656 PARK VILLAGE PL.
APARTMENT D.

City DALLAS State TX Zip Code 75230-3901

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt 10 / 29 / 2010
Transaction ID: SA11.13961686
Amount of Each Receipt this Period 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. KENNETH I. BRONES

Mailing Address 4906 60TH AVE

City SWEA CITY State IA Zip Code 50590

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt 10 / 25 / 2010
Transaction ID: SA11.13948086
Amount of Each Receipt this Period 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. REBBECA BROOKS

Mailing Address 467 GLEN LILY RD.

City BOWLING GREEN State KY Zip Code 42101-2873

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13938341
Amount of Each Receipt this Period 35.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 235.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 259 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. EDWARD T. BROOMELL

Mailing Address 82 FRANKLIN CT

City State Zip Code
FLEMINGTON NJ 08822-2006

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929624

Amount of Each Receipt this Period
65.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN L. BROUILLARD

Mailing Address 374 STILSON CANYON RD

City State Zip Code
CHICO CA 95928-9117

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 1 0

Transaction ID: SA11.13966801

Amount of Each Receipt this Period
60.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. BILLY BROWN

Mailing Address 15 GRAND MANOR

City State Zip Code
SUGAR LAND TX 77479-2556

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BLACKHAWK SPECIALTY TOOLS OIL SERVICE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955978

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1125.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 260 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. BRADLEY BROWN

Mailing Address **1915 COUNTY ROAD 146**

City **BOLIGEE** State **AL** Zip Code **35443-4217**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **11 / 05 / 2010**

Transaction ID: SA11.13966232

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. BRUCE D. BROWN

Mailing Address **1143 OLD TRAIL RD**

City **CLARKS SUMMIT** State **PA** Zip Code **18411-9255**

FEC ID number of contributing federal political committee. **C**

Name of Employer **B & S REFRIGERATED TRANSPORT INC.** Occupation **PRESIDENT**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **10 / 14 / 2010**

Transaction ID: SA11.13918424

Amount of Each Receipt this Period **500.00**

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DAVID BROWNING

Mailing Address **752 EAST 1200 NORTH**

City **SHELLEY** State **ID** Zip Code **83274-5021**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **SELF-EMPLOYED**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **10 / 25 / 2010**

Transaction ID: SA11.13948168

Amount of Each Receipt this Period **250.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **850.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 261 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DAVID BROWN

Mailing Address 207 S MAIN ST.

City State Zip Code
YALE MI 48097-3322

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13947767

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DAVID BROWN, III

Mailing Address 2665 OAK RIDGE CT.

City State Zip Code
FORT MYERS FL 33901-9389

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961545

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MISS DIANA L. BROWN

Mailing Address 1037 W ALTGELD ST

City State Zip Code
CHICAGO IL 60614-2208

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13957692

Amount of Each Receipt this Period
35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **385.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 262 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DONALD BROWNE

Mailing Address 255 ABINGTON DR. NE

City ATLANTA State GA Zip Code 30328-1203

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933172

Amount of Each Receipt this Period
101.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. FRANK BROWNELL, III

Mailing Address 200 SOUTH FRONT STREET

City MONTEZUMA State IA Zip Code 50171-1159

FEC ID number of contributing federal political committee. **C**

Name of Employer BROWNELL INC.
Occupation CHAIRMAN/CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961232

Amount of Each Receipt this Period
10000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. FREDERICK E. BROWNING

Mailing Address 151 LAFAYETTE TERRACE UNIT#22

City CROSSVILLE State TN Zip Code 38558-7564

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 1 0

Transaction ID: SA11.13965184

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **10151.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 263 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GRANT D. BROWN

Mailing Address 665 ANGELITA DRIVE

City State Zip Code
PRESCOTT AZ 86303-5014

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 256.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932667

Amount of Each Receipt this Period
26.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. HARLAN L. BROWN

Mailing Address 100662 COUNTY ROAD 16

City State Zip Code
MITCHELL NE 69357-2136

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931733

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES G. BROWN

Mailing Address 3105 COMMANCHE TRAIL

City State Zip Code
LAFAYETTE IN 47909-3222

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943559

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 266.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 264 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JOHN E. BROWNELL, JR.

Mailing Address 133 SPRINGHOUSE LANE

City State Zip Code
PITTSBURGH PA 15238-2315

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941339

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. JUDY BROWN

Mailing Address 10384 LA CEBRA AVE

City State Zip Code
FOUNTAIN VALLEY CA 92708-5204

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 315.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958555

Amount of Each Receipt this Period

60.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. KAREN BROWN

Mailing Address 1 PEACHTREE BATTLE AVE NW

City State Zip Code
ATLANTA GA 30305-4109

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ARCHSTONE REAL ESTATE

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953644

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

185.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 265 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. KATHRYN M. BROWN

Mailing Address P.O. BOX 815

City State Zip Code
LAKE CITY SC 29560-0815

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BROWN ANIMAL HOSPITAL BOOKKEEPER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 507.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948925

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KATHERINE ROSE BROWNING

Mailing Address 601 I ST

City State Zip Code
OAKLAND MD 21550-3318

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GARRETT COLLEGE C.P.A.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946003

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
KATHERINE ROSE BROWNING

Mailing Address 601 I ST

City State Zip Code
OAKLAND MD 21550-3318

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GARRETT COLLEGE C.P.A.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963067

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 100.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 266 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. MALCOLM L. BROWN

Mailing Address 10 FONTIS TER

City State Zip Code
CROSSVILLE TN 38558-7615

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 28 / 2010

Transaction ID: SA11.13957659

Amount of Each Receipt this Period

60.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. MURIEL R. BROWN

Mailing Address 819 TOYON WAY

City State Zip Code
REDWOOD CITY CA 94062-3119

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
RETIRED

Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 01 / 2010

Transaction ID: SA11.13964050

Amount of Each Receipt this Period

20.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
OLGA BROWNE

Mailing Address 507 CORONA DEL CAMPO LOOP

City State Zip Code
LAS CRUCES NM 88011-4050

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
265.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 19 / 2010

Transaction ID: SA11.13931560

Amount of Each Receipt this Period

160.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

240.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 267 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
PHILIP BROWN

Mailing Address 10811 W. SANDS DR.

City State Zip Code
SUN CITY AZ 85373-4014

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GLENDALE COMMUNITY COLLEGE INSTRUCTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928378

Amount of Each Receipt this Period
199.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PHILIP BROWN

Mailing Address 10811 W. SANDS DR.

City State Zip Code
SUN CITY AZ 85373-4014

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GLENDALE COMMUNITY COLLEGE INSTRUCTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 1 0

Transaction ID: SA11.13947632

Amount of Each Receipt this Period
101.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RALPH E. BROWN

Mailing Address 7509 FLAGSTONE ST

City State Zip Code
FORT WORTH TX 76118-6953

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LAPELLM PARTNERS INC ADMINISTRATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928514

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **400.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 268 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. RALPH E. BROWN	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 7509 FLAGSTONE ST	Transaction ID: SA11.13943023
	City State Zip Code FORT WORTH TX 76118-6953	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation LAPELLM PARTNERS INC ADMINISTRATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

B.	Full Name (Last, First, Middle Initial) MR. RALPH E. BROWN	Date of Receipt MM / DD / YYYY 11 / 18 / 2010
	Mailing Address 7509 FLAGSTONE ST	Transaction ID: SA11.13969810
	City State Zip Code FORT WORTH TX 76118-6953	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation LAPELLM PARTNERS INC ADMINISTRATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

C.	Full Name (Last, First, Middle Initial) MR. RAY BROWN	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 3216 PLANTATION RD.	Transaction ID: SA11.13957700
	City State Zip Code RALEIGH NC 27609-7826	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional)	▶	410.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 269 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. SHELLY BROWN

Mailing Address 1030 GREEN VALLEY RD

City State Zip Code
BRYN MAWR PA 19010-1912

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 02 / 2010

Transaction ID: SA11.13962524

Amount of Each Receipt this Period

210.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. STANLEY M. BROWN

Mailing Address 122 BEECHWOOD DR

City State Zip Code
PIEDMONT SC 29673-9171

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
315.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 01 / 2010

Transaction ID: SA11.13960790

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. STEPHEN BROWNELL

Mailing Address 76 MERRIWEATHER ROAD

City State Zip Code
GROSSE POINTE MI 48236-3623

FEC ID number of contributing federal political committee. **C**

Name of Employer KIRLIN LIGHTING

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

VP OPERATIONS

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 29 / 2010

Transaction ID: SA11.13961224

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5320.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 270 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. WILLIAM E. BROWN	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 253 HIDDEN LAKE RD.	Transaction ID: SA11.13955877
	City State Zip Code HENDERSONVILLE TN 37075-5543	Amount of Each Receipt this Period 110.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation COMPETITION POWDER COATERS POWDER COATING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

B.	Full Name (Last, First, Middle Initial) PATRICIA J. BRUBAKER	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 393 FEARRINGTON POST	Transaction ID: SA11.13936483
	City State Zip Code PITTSBORO NC 27312-8518	Amount of Each Receipt this Period 1.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 361.00	

C.	Full Name (Last, First, Middle Initial) PATRICIA J. BRUBAKER	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 393 FEARRINGTON POST	Transaction ID: SA11.13953267
	City State Zip Code PITTSBORO NC 27312-8518	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 361.00	

SUBTOTAL of Receipts This Page (optional)	▶	211.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 271 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROGER W. BRUBAKER

Mailing Address 4250 ROSEMONT CT.

City State Zip Code
POWDER SPGS GA 30127-5412

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954704

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LARRY A. BRUCHEY

Mailing Address P.O. BOX 93015

City State Zip Code
SOUTHLAKE TX 76092-1015

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961437

Amount of Each Receipt this Period
150.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
THOMAS BRUDER, JR.

Mailing Address 600 REED RD.

City State Zip Code
BROOMALL PA 19008-3505

FEC ID number of contributing federal political committee. **C**

Name of Employer REED ROAD ASSOCIATES
Occupation PARTNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934844

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **400.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 272 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DON A. BRUHL

Mailing Address 416 SPYGLASS ST

City State Zip Code
MEADOWLAKES TX 78654-6418

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	1	0

Transaction ID: SA11.13940373

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
FAITH BRUINS

Mailing Address 401 9TH STREET, NW
SUITE 900

City State Zip Code
WASHINGTON DC 20004-2145

FEC ID number of contributing federal political committee. **C**

Name of Employer NIXON & PEABODY
Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	0	/	2	0	1	0

Transaction ID: SA11.13968693

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. DONNA J. BRUMAT

Mailing Address 2904 TUGIE ST

City State Zip Code
METAIRIE LA 70003-3930

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13932717

Amount of Each Receipt this Period
30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **330.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 273 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. DONNA J. BRUMAT

Mailing Address 2904 TUGIE ST

City State Zip Code
METAIRIE LA 70003-3930

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951199

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. SAMUEL A. BRUNELLI

Mailing Address 15462 GULF BOULEVARD
UNIT 508

City State Zip Code
MADEIRA BEACH FL 33708-1833

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961236

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. FRANK W. BRUNO

Mailing Address 32 CLAPBOARD HILL ROAD

City State Zip Code
WESTPORT CT 06880-6317

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CERBERUS CAPITAL EXECUTIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 20000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13955985

Amount of Each Receipt this Period
20000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 21050.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 274 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DR. CLINTON BRUNSON		Date of Receipt
	Mailing Address 6773 CARENE		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	FRANKSTON	TX	75763-3150
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: SA11.13947806
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation RADIOLOGY	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="250.00"/>
		<input type="text" value="250.00"/>	CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MR. RIGIALD BRUNSON		Date of Receipt
	Mailing Address 4 JARDIN TRACE		<input type="text" value="11"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	HOT SPRINGS	AR	71909-7887
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: SA11.13971673
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="90.00"/>
		<input type="text" value="265.00"/>	CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MR. ROSS A. BRUPBACHER		Date of Receipt
	Mailing Address 200 PEMBROKE LN		<input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	LAFAYETTE	LA	70508-5616
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: SA11.13918453
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="210.00"/>
		<input type="text" value="370.00"/>	CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="550.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 275 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. PETER BRUSATI

Mailing Address 742 ROBINHOOD LN.

City State Zip Code
REDLANDS CA 92373-5738

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NORTHROP GRUMM CORP MECHANICAL ENGINEER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 310.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955085

Amount of Each Receipt this Period

210.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JOHN J. BRUSCHI

Mailing Address 303 E 46TH ST

City State Zip Code
NEW YORK NY 10017-3054

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 525.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932469

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JOHN J. BRUSCHI

Mailing Address 303 E 46TH ST

City State Zip Code
NEW YORK NY 10017-3054

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 525.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948988

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

360.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 276 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. JOHN J. BRUSCHI		Date of Receipt
	Mailing Address 303 E 46TH ST		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 8 / 2 0 1 0
	City	State	Zip Code
	NEW YORK	NY	10017-3054
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13959763
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 525.00	<input type="text"/> 100.00
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MRS. VERNA E. BRUSS		Date of Receipt
	Mailing Address 2222 W HAYES STREET		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 1 4 / 2 0 1 0
	City	State	Zip Code
	WOODBURN	OR	97071-3036
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13928544
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 330.00	<input type="text"/> 85.00
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) ELIZABETH BRYAN		Date of Receipt
	Mailing Address 107 BRIGHTWOOD CLUB DR.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 1 4 / 2 0 1 0
	City	State	Zip Code
	LUTHVLE TIMON	MD	21093-3628
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13918481
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	<input type="text"/> 160.00
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 345.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 277 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JACOB F. BRYAN, III

Mailing Address 5249 YACHT CLUB RD.

City JACKSONVILLE State FL Zip Code 32210-8325

FEC ID number of contributing federal political committee. **C**

Name of Employer BRYAN GROUP Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 19 / 2010

Transaction ID: SA11.13942507

Amount of Each Receipt this Period 2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. ROXIE A. BRYANT

Mailing Address 507 ST CHARLES DRIVE

City ARLINGTON State TX Zip Code 76013-1367

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 02 / 2010

Transaction ID: SA11.13964786

Amount of Each Receipt this Period 60.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. WILLIAM F. BRYANT

Mailing Address 939 HUNTINGTON PARK DR.

City CHARLOTTE State NC Zip Code 28211-3921

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2010

Transaction ID: SA11.13957206

Amount of Each Receipt this Period 100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 2660.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 278 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. ELIZABETH BRYDEN

Mailing Address 1 W 67TH ST APT 611

City State Zip Code
NEW YORK NY 10023-6200

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 865.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945394

Amount of Each Receipt this Period
135.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MOLLY BRYSON

Mailing Address 401 9TH STREET N.W.
SUITE 900

City State Zip Code
WASHINGTON DC 20004-2145

FEC ID number of contributing federal political committee. **C**

Name of Employer NIXON PEABODY Occupation ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 411.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 0 / 2 0 1 0

Transaction ID: SA11.13968699

Amount of Each Receipt this Period
411.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. NIRMAL BUAL

Mailing Address 21216 NORTHWEST FREEWAY
SUITE 650

City State Zip Code
CYPRESS TX 77429-4697

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13961180

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **5546.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 279 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MR. ROLLIN N. BUBERT</p> <p>Mailing Address 140 W GOEBEL DR.</p> <p>City State Zip Code LOMBARD IL 60148-1625</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 206.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 18 / 2010</p> <p>Transaction ID: SA11.13929165</p> <p>Amount of Each Receipt this Period 25.00</p> <p>CONTRIBUTION</p>
---	---

<p>B. Full Name (Last, First, Middle Initial) DR. ROBERT D. BUCHANAN</p> <p>Mailing Address 4571 EAGLERIDGE CIR APT 108</p> <p>City State Zip Code PUEBLO CO 81008</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1602.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 18 / 2010</p> <p>Transaction ID: SA11.13935723</p> <p>Amount of Each Receipt this Period 150.00</p> <p>CONTRIBUTION</p>
---	--

<p>C. Full Name (Last, First, Middle Initial) DR. ROBERT D. BUCHANAN</p> <p>Mailing Address 4571 EAGLERIDGE CIR APT 108</p> <p>City State Zip Code PUEBLO CO 81008</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1602.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 26 / 2010</p> <p>Transaction ID: SA11.13957083</p> <p>Amount of Each Receipt this Period 150.00</p> <p>CONTRIBUTION</p>
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SUBTOTAL of Receipts This Page (optional)	325.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 280 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. ANITA R. BUCHHOLZ

Mailing Address 3043 72ND STREET

City State Zip Code
FLUSHING NY 11370-1416

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DOOLEY ELECTRIC BOOKKEEPER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952637

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. ANITA R. BUCHHOLZ

Mailing Address 3043 72ND STREET

City State Zip Code
FLUSHING NY 11370-1416

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DOOLEY ELECTRIC BOOKKEEPER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Transaction ID: SA11.13968350

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. BETTY BUCKMAN

Mailing Address 22881 NADINE CIR UNIT B

City State Zip Code
TORRANCE CA 90505-8805

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13931115

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 281 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. JANE BUDENSTEIN

Mailing Address 1225 GROVE PARK

City State Zip Code
AUBURN AL 36830-2117

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 705.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956648

Amount of Each Receipt this Period
65.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. JANE BUDENSTEIN

Mailing Address 1225 GROVE PARK

City State Zip Code
AUBURN AL 36830-2117

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 705.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958833

Amount of Each Receipt this Period
65.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. BARBARA H. BUENTEMEIER

Mailing Address 2225 DILLON ROAD

City State Zip Code
COLUMBIA FLS MT 59912-8926

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931614

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **230.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 282 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RICHARD C. BUESCHER

Mailing Address W708 KING RD

City State Zip Code
BROOKLYN WI 53521-9755

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
11 / 16 / 2010

Transaction ID: SA11.13969364

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN D. BUHL

Mailing Address 1304 SEVERN WAY STE. F

City State Zip Code
STERLING VA 20166-8916

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BUHL ELECT CO. INC. ELECTRIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 625.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13936142

Amount of Each Receipt this Period
375.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES E. BUHR

Mailing Address 429 FOX RUN RD.

City State Zip Code
GRAYSON KY 41143-8819

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2010

Transaction ID: SA11.13931130

Amount of Each Receipt this Period
45.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **470.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 283 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
JOHN BUKRY

Mailing Address 3707 BRANDY ROCK WAY

City State Zip Code
REDWOOD CITY CA 94061-1900

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935668

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ALBERT B. BULLINGTON

Mailing Address 378 S MONTEREY DR

City State Zip Code
MOORE SC 29369-9067

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 650.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13964437

Amount of Each Receipt this Period
400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JIMMY C. BUNCH

Mailing Address 177 COUNTY RD 48

City State Zip Code
ATHENS TN 37303-6603

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED TRUCK DRIVER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942571

Amount of Each Receipt this Period
90.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 990.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 284 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. KENDRA BUNCH		Date of Receipt
	Mailing Address 1215 LEXINGTON SQ		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 9 / 2 0 1 0
	City	State	Zip Code
	CORSICANA	TX	75110-2023
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13931596
Name of Employer CSID		Occupation TEACHER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	<input type="text"/> 110.00
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) MRS. MARY BETH BUNKER		Date of Receipt
	Mailing Address 430 NE 160TH ST		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 6 / 2 0 1 0
	City	State	Zip Code
	HUDSON	KS	67545-9029
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13956132
Name of Employer SELF-EMPLOYED		Occupation FARMER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00	<input type="text"/> 100.00
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) MR. DANIEL W. BUNN		Date of Receipt
	Mailing Address P.O. BOX 5005 P.M.B. 116		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 1 / 2 0 1 0
	City	State	Zip Code
	RANCHO SANTA FE	CA	92067-5005
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13942981
Name of Employer DANBUN ENTERPRISES		Occupation INVESTOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 22500.00	<input type="text"/> 5000.00
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 5210.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 285 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT M. BUNNELL

Mailing Address P.O. BOX 613

City State Zip Code
MARION MA 02738-0011

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955421

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN S. BUNTON

Mailing Address 780 MOUNTAIN RD

City State Zip Code
PARSONSFIELD ME 04047-6821

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 615.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13931283

Amount of Each Receipt this Period
75.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. PETER BURBANK

Mailing Address 47 FARRWOOD DR.

City State Zip Code
ANDOVER MA 01810-5225

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WEWS INVESTMENT BROKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 1 0

Transaction ID: SA11.13966166

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **625.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 286 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JEFF C. BURCHARDT
 Mailing Address P.O. BOX 603
 City State Zip Code
 OCONOMOWOC WI 53066-0603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 LORLEBERG CLERK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 226.00
 Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13932509
 Amount of Each Receipt this Period: 1.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JEFF C. BURCHARDT
 Mailing Address P.O. BOX 603
 City State Zip Code
 OCONOMOWOC WI 53066-0603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 LORLEBERG CLERK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 226.00
 Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13934723
 Amount of Each Receipt this Period: 25.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN A. BURCH
 Mailing Address 12143 HIDDEN BROOK TERRACE
 City State Zip Code
 NORTH POTOMAC MD 20878-3321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00
 Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13947099
 Amount of Each Receipt this Period: 25.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 51.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 287 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
GARLAND BURDETTE

Mailing Address 11312 SNOW VIEW CT

City YUCAIPA State CA Zip Code 92399-3518

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13941051
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
HOWARD BURDICK

Mailing Address 1401 MEADOW RANCH RD

City MCKINNEY State TX Zip Code 75071-8035

FEC ID number of contributing federal political committee. **C**

Name of Employer ANJILON CONSULTING Occupation BUSINESS ANALYST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA11.13928499
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. STEVE BURGESS

Mailing Address PO BOX 686

City GARDEN CITY State KS Zip Code 67846-0686

FEC ID number of contributing federal political committee. **C**

Name of Employer GARDEN SPOUT RENTALS Occupation LANDLORD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 11 / 12 / 2010
Transaction ID: SA11.13967810
Amount of Each Receipt this Period: 250.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 400.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 288 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JOHN P. BURK

Mailing Address 2015 CREEK RD

City State Zip Code
HAINESPORT NJ 08036-2773

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918429

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. DAVID M. BURKE

Mailing Address 1004 VASSAR RD

City State Zip Code
ALEXANDRIA VA 22314-4730

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 401.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930204

Amount of Each Receipt this Period

101.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
FRANCIS BURKE

Mailing Address 143 FEARING PL.

City State Zip Code
MANTEO NC 27954-9683

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 730.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932510

Amount of Each Receipt this Period

30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1131.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 289 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
FRANCIS BURKE

Mailing Address 143 FEARING PL.

City State Zip Code
MANTEO NC 27954-9683

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 730.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936981

Amount of Each Receipt this Period
30.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
FRANCIS BURKE

Mailing Address 143 FEARING PL.

City State Zip Code
MANTEO NC 27954-9683

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 730.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952658

Amount of Each Receipt this Period
45.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
FRANCIS BURKE

Mailing Address 143 FEARING PL.

City State Zip Code
MANTEO NC 27954-9683

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 730.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954949

Amount of Each Receipt this Period
55.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 130.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 290 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
FRANCIS BURKE

Mailing Address 143 FEARING PL.

City State Zip Code
MANTEO NC 27954-9683

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 730.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961980

Amount of Each Receipt this Period
30.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
FRANCIS BURKE

Mailing Address 143 FEARING PL.

City State Zip Code
MANTEO NC 27954-9683

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 730.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963789

Amount of Each Receipt this Period
35.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
FRANCIS BURKE

Mailing Address 143 FEARING PL.

City State Zip Code
MANTEO NC 27954-9683

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 730.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963796

Amount of Each Receipt this Period
35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 100.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 291 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
FRANCIS BURKE

Mailing Address 143 FEARING PL.

City State Zip Code
MANTEO NC 27954-9683

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 730.00

Date of Receipt
MM / DD / YYYY
11 / 19 / 2010

Transaction ID: SA11.13972073

Amount of Each Receipt this Period
30.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LEAH M. BURKE

Mailing Address 312 E SPRINGFIELD RD.

City State Zip Code
ARCOLA IL 61910-1705

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13940040

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. LOUISE J. BURKE

Mailing Address 250 E. WARREN STREET

City State Zip Code
ISELIN NJ 08830-1256

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 261.00

Date of Receipt
MM / DD / YYYY
10 / 28 / 2010

Transaction ID: SA11.13960098

Amount of Each Receipt this Period
26.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 96.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 292 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. MARGIE C. BURKE

Mailing Address 2810 FOX GLENN ST

City State Zip Code
JACKSONVILLE AR 72076-2604

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930364

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
JACK G. BURKHALTER

Mailing Address P.O. BOX 762

City State Zip Code
OLTON TX 79064-0762

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953155

Amount of Each Receipt this Period

90.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. BETTY L. BURLEY

Mailing Address 166 N CRESCENT DR

City State Zip Code
MASON CITY IA 50401-2852

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 231.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 1 0

Transaction ID: SA11.13967368

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

215.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 293 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. BILL BURNDRETT

Mailing Address 205 SOMERSET CIR.

City State Zip Code
WOODSTOCK GA 30189-7902

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955909

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. JOHN M. BURNLEY

Mailing Address 2533 HUFFMAN RD

City State Zip Code
BOONVILLE IN 47601-8216

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DEACOMESS HOSPITAL PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953543

Amount of Each Receipt this Period
101.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. BETTY BURNS

Mailing Address 756 27 RD

City State Zip Code
GRAND JCT CO 81506-1884

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 620.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931639

Amount of Each Receipt this Period
410.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 611.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 294 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. BILLY F. BURNS

Mailing Address 576 BURNS LN

City State Zip Code
LAVINIA TN 38348-2202

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 486.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13932182
Amount of Each Receipt this Period: 45.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. EUGENE A. BURNS

Mailing Address 4500 FOOTHILL RD.

City State Zip Code
CARPINTERIA CA 93013-3016

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED FARMER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 695.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13935748
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. EUGENE A. BURNS

Mailing Address 4500 FOOTHILL RD.

City State Zip Code
CARPINTERIA CA 93013-3016

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED FARMER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 695.00

Date of Receipt: 11 / 19 / 2010
Transaction ID: SA11.13972004
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 125.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 295 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MATTHEW BURNS

Mailing Address 250 6TH STREET EAST

City SAINT PAUL State MN Zip Code 55101-4911

FEC ID number of contributing federal political committee. **C**

Name of Employer UNITEDHEALTH GROUP Occupation DIRECTOR OF COMMUNICATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 29 / 2010
Transaction ID: SA11.13959324
Amount of Each Receipt this Period: 500.00
CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. PATRICIA A. BURNS

Mailing Address 6424 SEMINOLE TRL.

City MENTOR State OH Zip Code 44060-3411

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13931889
Amount of Each Receipt this Period: 35.00
CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. SHIRLEY BURNS

Mailing Address 428 GLENEAGLES WAY

City VERSAILLES State KY Zip Code 40383-1865

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 261.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA11.13931334
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **635.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 296 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. SHIRLEY BURNS

Mailing Address 428 GLENEAGLES WAY

City State Zip Code
VERSAILLES KY 40383-1865

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 261.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13936009
Amount of Each Receipt this Period: 1.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WARREN T. BURNS

Mailing Address 6 ADAMS COURT

City State Zip Code
BREWER ME 04412-1213

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NEW ENGLAND SCIL OF COMMUNICATIONS P/T PROFESSOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13940097
Amount of Each Receipt this Period: 160.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. M. E. BURR

Mailing Address 909 W B AVE

City State Zip Code
NORTH LITTLE ROCK AR 72116-9178

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13952137
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 186.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 297 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. ALLEN BURT

Mailing Address 1040 GOLDEN EAGLE TRAIL

City State Zip Code
RIDGWAY CO 81432-9003

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13943055

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. TED BURT

Mailing Address 8S041 CREEK DR

City State Zip Code
NAPERVILLE IL 60540-9326

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
C.T.BURT SALES, INC SELF-EMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939603

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MARVIN O. BURTON

Mailing Address 105 QUAIL HAVEN DR

City State Zip Code
WALHALLA SC 29691-4129

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 256.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950030

Amount of Each Receipt this Period
55.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 205.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 298 / 3187		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. MAURICE D. BURWELL	Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 1 0
	Mailing Address 2607 WELSH ROAD APT. L305	Transaction ID: SA11.13946510
	City State Zip Code PHILADELPHIA PA 19114-3340	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SELF-EMPLOYED ENGINEER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 297.00	

B.	Full Name (Last, First, Middle Initial) MR. JERRY BUSBY	Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0
	Mailing Address 1529 BLACKHALL LN. SE	Transaction ID: SA11.13945400
	City State Zip Code DECATUR AL 35601-6917	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) MRS. LORENE BUSBY	Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0
	Mailing Address 313 WASHINGTON ST	Transaction ID: SA11.13950549
	City State Zip Code PEKIN IL 61554-4134	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	275.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 299 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. CLARICE F. BUSH	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 13619 SYLVAN DR.	Transaction ID: SA11.13930248
	City State Zip Code BIGFORK MT 59911-8445	Amount of Each Receipt this Period 26.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SELF-EMPLOYED ORCHARDIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 376.00	

B.	Full Name (Last, First, Middle Initial) DR. PAUL E. BUSH	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 1619 SUNNY CREST DR.	Transaction ID: SA11.13952269
	City State Zip Code FULLERTON CA 92835-3754	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 335.00	

C.	Full Name (Last, First, Middle Initial) MRS. SHARON BUSH	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 2639 PARK VIEW DR.	Transaction ID: SA11.13950707
	City State Zip Code BILOXI MS 39531-2721	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	176.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 300 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOSEPH H. BUTCHER

Mailing Address 6019 GREENWAY MANOR LANE

City State Zip Code
SPRING TX 77373-4926

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SMALL BUSINESS OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931661

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BRYAN V. BUTLER

Mailing Address 3106 CANDLE POND LANE

City State Zip Code
SPRING TX 77388-2726

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930999

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. KENNETH F. BUTLER, JR.

Mailing Address 101 SUMMERTON DR

City State Zip Code
BLUFFTON SC 29910-4804

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943366

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **400.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 301 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
SANDRA J. BUTLER

Mailing Address 13035 SANDIA POINT RD NE

City State Zip Code
ALBUQUERQUE NM 87111-8321

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 751.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935433

Amount of Each Receipt this Period

1.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JOHN L. BUTSCHKY

Mailing Address 606 BAY HILLS DRIVE

City State Zip Code
ARNOLD MD 21012-2003

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952461

Amount of Each Receipt this Period

30.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
CHARLES BUTT

Mailing Address 9461 OAK DR.

City State Zip Code
SPRINGDALE AR 72762-2511

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 525.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937188

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

81.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 302 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
CHARLES BUTT

Mailing Address 9461 OAK DR.

City State Zip Code
SPRINGDALE AR 72762-2511

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 525.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13969281

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. HELEN BUTTERFIELD

Mailing Address 609 GLENDON WAY

City State Zip Code
WAUKESHA WI 53188-2652

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UNEMPLOYED UNEMPLOYED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955804

Amount of Each Receipt this Period

105.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. NONA A. BUTTERWORTH

Mailing Address 182 IRVING PL.

City State Zip Code
BASKING RIDGE NJ 07920-3083

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13960177

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

355.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 303 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ROGER A. BUTTERS

Mailing Address 629 1/2 N CENTER ST.

City State Zip Code
CORRY PA 16407-1207

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954999

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CHARLES W. BYNUM

Mailing Address 219 AL HWY 73

City State Zip Code
BRYANT AL 35958-5015

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950079

Amount of Each Receipt this Period
60.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CHARLES W. BYNUM

Mailing Address 219 AL HWY 73

City State Zip Code
BRYANT AL 35958-5015

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 1 0

Transaction ID: SA11.13971989

Amount of Each Receipt this Period
120.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 280.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 304 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. G. T. BYNUM

Mailing Address **3607 SOUTH FLORENCE AVENUE**

City **TULSA** State **OK** Zip Code **74105-3622**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GT BYNUM CONSULTING** Occupation **CONSULTING**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **10 / 21 / 2010**

Transaction ID: SA11.13942977

Amount of Each Receipt this Period **500.00**

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MARSHALL BYNUM

Mailing Address **220 DEEP CANYON DR.**

City **WHITNEY** State **TX** Zip Code **76692-7533**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RAYTHEON COMPANY** Occupation **SENIOR ENGINEERING MANAGER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **10 / 19 / 2010**

Transaction ID: SA11.13932402

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MARSHALL BYNUM

Mailing Address **220 DEEP CANYON DR.**

City **WHITNEY** State **TX** Zip Code **76692-7533**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RAYTHEON COMPANY** Occupation **SENIOR ENGINEERING MANAGER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **11 / 03 / 2010**

Transaction ID: SA11.13965106

Amount of Each Receipt this Period **50.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **650.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 305 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. BILL BYRD

Mailing Address 105 MOUNTAIN MEADOW CIR

City State Zip Code
WEAVERVILLE NC 28787-9448

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13928996

Amount of Each Receipt this Period 110.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. BONNY BYRD

Mailing Address 407 LA VISTA RD.

City State Zip Code
PUEBLO CO 81005-2622

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13963344

Amount of Each Receipt this Period 60.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
J BYRD

Mailing Address 2626 BOHICKET RD.

City State Zip Code
JOHNS ISLAND SC 29455-7205

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13946676

Amount of Each Receipt this Period 50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 220.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 306 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. JOHN L. BYRD, JR.

Mailing Address 407 LA VISTA RD

City State Zip Code
PUEBLO CO 81005-2622

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13934749

Amount of Each Receipt this Period
60.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. JOHN L. BYRD, JR.

Mailing Address 407 LA VISTA RD

City State Zip Code
PUEBLO CO 81005-2622

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
11 / 17 / 2010

Transaction ID: SA11.13969834

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
LAURA BYRNE

Mailing Address 523 REGENCY XING

City State Zip Code
SOUTHLAKE TX 76092-9501

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2010

Transaction ID: SA11.13957002

Amount of Each Receipt this Period
35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **195.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 307 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JACK M. BYRUM

Mailing Address 440 DOVE DR W

City State Zip Code
FRANKLIN IN 46131-2737

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 335.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942598

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
ANTONIO O. CABRERA

Mailing Address 565 TANGERINE DR

City State Zip Code
EL CENTRO CA 92243-4425

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 268.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918413

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
ANTONIO O. CABRERA

Mailing Address 565 TANGERINE DR

City State Zip Code
EL CENTRO CA 92243-4425

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 268.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938452

Amount of Each Receipt this Period

40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

165.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 308 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MICHAEL O. CACECI

Mailing Address 17 CAMBRIC CIR

City State Zip Code
PITTSFORD NY 14534-4510

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
XEROX MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13929435

Amount of Each Receipt this Period
70.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RAYMOND CADENA

Mailing Address 551 N SAN JOAQUIN AVE

City State Zip Code
SAN ANTONIO TX 78228-6137

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13946627

Amount of Each Receipt this Period
30.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RAYMOND CADENA

Mailing Address 551 N SAN JOAQUIN AVE

City State Zip Code
SAN ANTONIO TX 78228-6137

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13953309

Amount of Each Receipt this Period
30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 130.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 309 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ANDREW CADER

Mailing Address 70 MEETING HOUSE ROAD

City State Zip Code
MT. KISCO NY 10549-4236

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED INVESTING

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
30400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951651

Amount of Each Receipt this Period

30400.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. THURLOW H. CAFFEY

Mailing Address 4801 GLENWOOD HILLS DR NE

City State Zip Code
ALBUQUERQUE NM 87111-3066

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
585.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931903

Amount of Each Receipt this Period

75.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. THURLOW H. CAFFEY

Mailing Address 4801 GLENWOOD HILLS DR NE

City State Zip Code
ALBUQUERQUE NM 87111-3066

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
585.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962741

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

30500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 310 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JAMES CAGE

Mailing Address 3259 DAVENPORT PARK LANE

City State Zip Code
DULUTH GA 30096-9238

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HONEYWELL SALES ENGINEERING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13931453

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MARGARET M. CAHILL

Mailing Address 84 PINE GROVE AVE

City State Zip Code
SUMMIT NJ 07901-2465

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: MM / DD / YYYY
10 / 26 / 2010

Transaction ID: SA11.13956342

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MAXWELL MERRILL CAIN

Mailing Address 224 OAKMONT CIR.

City State Zip Code
BIRMINGHAM AL 35244-2283

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 851.00

Date of Receipt: MM / DD / YYYY
10 / 20 / 2010

Transaction ID: SA11.13943868

Amount of Each Receipt this Period
51.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **401.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 311 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MAXWELL MERRILL CAIN

Mailing Address 224 OAKMONT CIR.

City State Zip Code
BIRMINGHAM AL 35244-2283

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 851.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13951837

Amount of Each Receipt this Period
70.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SUZANNE C. CAIRO

Mailing Address 14035 BOQUITA DR.

City State Zip Code
DEL MAR CA 92014-2944

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962602

Amount of Each Receipt this Period
110.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RAY CALANDRI

Mailing Address 36314 AVENIDA DEL SOL

City State Zip Code
CATHEDRAL CITY CA 92234-1590

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949004

Amount of Each Receipt this Period
120.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **300.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 312 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES R. CALDWELL

Mailing Address 3006 LOLITA PAMPLIN CIR.

City State Zip Code
HUNTSVILLE AL 35811-9537

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MEI TECHNOLOGIES INC ENGINEER MANAGER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 320.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933471

Amount of Each Receipt this Period
160.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
THELMA CALDWELL

Mailing Address 327 E 7TH. ST.

City State Zip Code
WALSENBURG CO 81089-2105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 355.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940412

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
THELMA CALDWELL

Mailing Address 327 E 7TH. ST.

City State Zip Code
WALSENBURG CO 81089-2105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 355.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 1 0

Transaction ID: SA11.13968874

Amount of Each Receipt this Period
75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 275.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 313 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. CHARLES MICHAEL CALLAIS

Mailing Address PO BOX 724

City State Zip Code
GOLDEN MEADOW LA 70357-0724

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CALLAIS PRESIDENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13947622

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DONALD J. CALLAHAN

Mailing Address 3510 CAMBRIDGE EST

City State Zip Code
QUINCY IL 62301-7425

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 401.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944146

Amount of Each Receipt this Period

1.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DONALD J. CALLAHAN

Mailing Address 3510 CAMBRIDGE EST

City State Zip Code
QUINCY IL 62301-7425

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 401.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944501

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2601.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 314 / 3187
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. KATHLEEN CALLAHAN		Date of Receipt
	Mailing Address 4 MEADOW LARK DR.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 0 1 / 2 0 1 0
	City	State	Zip Code
	E. NORTHPORT	NY	11731-4307
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: SA11.13963553
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 101.00
		<input type="text"/> 206.00	CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MR. CHARLOTTE E. CALLIF		Date of Receipt
	Mailing Address 9707 MIDDLETON RIDGE ROAD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 1 9 / 2 0 1 0
	City	State	Zip Code
	VIENNA	VA	22182-1493
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: SA11.13931550
Name of Employer SELF-EMPLOYED		Occupation CONSULTANT	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 200.00
		<input type="text"/> 550.00	CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MR. R. W. CALLOWAY		Date of Receipt
	Mailing Address 3811 TURTLE CREEK BLVD STE 400		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 2 7 / 2 0 1 0
	City	State	Zip Code
	DALLAS	TX	75219-4531
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: SA11.13958520
Name of Employer CALLOWAY, TORRES, BURDETTE & WEBER		Occupation ATTORNEY	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1.00
		<input type="text"/> 251.00	CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 302.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 315 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
BARRY CALVAGNA
Mailing Address 24 COOPER
City HUNTINGTON STATION State NY Zip Code 11746-3534
FEC ID number of contributing federal political committee. **C**
Name of Employer UAG Occupation SMALL BUS OWNER
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00
Date of Receipt 11 / 03 / 2010
Transaction ID: SA11.13964484
Amount of Each Receipt this Period 250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RICHARD J. CALVERT
Mailing Address 12236 GALESVILLE DR.
City GAITHERSBURG State MD Zip Code 20878-2072
FEC ID number of contributing federal political committee. **C**
Name of Employer U.S. FOOD AND DRUG ADMIN Occupation RESEARCH MEDICAL OFFICER
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 475.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13935675
Amount of Each Receipt this Period 150.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. LINDA L. CALVIN
Mailing Address 839 BRIGHT STAR STREET
City THOUSAND OAKS State CA Zip Code 91360-1004
FEC ID number of contributing federal political committee. **C**
Name of Employer CALRICHWELL CORP. INC. Occupation MANAGER
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 900.00
Date of Receipt 10 / 14 / 2010
Transaction ID: SA11.13918428
Amount of Each Receipt this Period 200.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 600.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 316 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. HUGH CAMERON

Mailing Address P.O. BOX 189

City State Zip Code
GROSSE ILE MI 48138-0189

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
241.00

Date of Receipt
10 / 22 / 2010

Transaction ID: SA11.13948524

Amount of Each Receipt this Period
21.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. THOMAS W. CAMERON

Mailing Address 848 N THOMPSON AVE

City State Zip Code
NIPOMO CA 93444-9493

FEC ID number of contributing federal political committee. **C**

Name of Employer UNEMPLOYED
Occupation ENGINEERING CONSULT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
10 / 18 / 2010

Transaction ID: SA11.13933999

Amount of Each Receipt this Period
30.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. THOMAS W. CAMERON

Mailing Address 848 N THOMPSON AVE

City State Zip Code
NIPOMO CA 93444-9493

FEC ID number of contributing federal political committee. **C**

Name of Employer UNEMPLOYED
Occupation ENGINEERING CONSULT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
10 / 25 / 2010

Transaction ID: SA11.13953180

Amount of Each Receipt this Period
30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **81.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 317 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. KIM J. CAMPAGNA, JR.	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 42228 N DEER TRAIL RD	Transaction ID: SA11.13931359
	City State Zip Code CAVE CREEK AZ 85331-2865	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 310.00

B.	Full Name (Last, First, Middle Initial) CALVIN A. CAMPBELL, JR.	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 1310 N RITCHIE CT APT 5B	Transaction ID: SA11.13946127
	City State Zip Code CHICAGO IL 60610-4951	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00

C.	Full Name (Last, First, Middle Initial) CALVIN A. CAMPBELL, JR.	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 1310 N RITCHIE CT APT 5B	Transaction ID: SA11.13948876
	City State Zip Code CHICAGO IL 60610-4951	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00

SUBTOTAL of Receipts This Page (optional)	▶	225.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 318 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. CATHERINE M. CAMPBELL

Mailing Address 880 BRENTWOOD DR.

City State Zip Code
BILOXI MS 39532-2261

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943125

Amount of Each Receipt this Period
45.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DONALD H. CAMPBELL

Mailing Address 3818 SHADYLAWN AVENUE NW

City State Zip Code
ROANOKE VA 24012-3342

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929017

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. MARY CAMPBELL

Mailing Address 151 GREAT WATER CIR

City State Zip Code
SANDPOINT ID 83864-5107

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13960173

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1145.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 319 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MARK A. CAMPBELL

Mailing Address 2200 WILSON AVE

City State Zip Code
SIGNAL MOUNTAIN TN 37377-3350

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	2	/	2	0	1	0

Transaction ID: SA11.13962503

Amount of Each Receipt this Period
110.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RANDOLPH G. CAMPBELL

Mailing Address 730 BUFF DR NE

City State Zip Code
ATLANTA GA 30342-3902

FEC ID number of contributing federal political committee. **C**

Name of Employer SUNTRUST
Occupation BANKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	1	0

Transaction ID: SA11.13950425

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT R. CAMPBELL

Mailing Address 2348 CORAL LEAF RD

City State Zip Code
TOMS RIVER NJ 08755-0864

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13936930

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **660.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 320 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. THOMAS K. CAMPBELL

Mailing Address 509 WAYNE DR

City State Zip Code
NEWARK OH 43055-1503

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ATTORNEY/PARTNER THOMAS K CAMPBELL

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956350

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. LEO EUGENE CAMPISI

Mailing Address 812 EAGAN OAKS LANE

City State Zip Code
SAINT PAUL MN 55123-2467

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LEO COMPISI BEEF SALES

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 231.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948374

Amount of Each Receipt this Period

1.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. LEO EUGENE CAMPISI

Mailing Address 812 EAGAN OAKS LANE

City State Zip Code
SAINT PAUL MN 55123-2467

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LEO COMPISI BEEF SALES

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 231.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961892

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

226.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 321 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. SANDRA J. CANCRO

Mailing Address 18514 SE 440TH STREET

City ENUMCLAW State WA Zip Code 98022-9151

FEC ID number of contributing federal political committee. **C**

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt: 10 / 19 / 2010

Transaction ID: SA11.13938445

Amount of Each Receipt this Period: 25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. SANDRA J. CANCRO

Mailing Address 18514 SE 440TH STREET

City ENUMCLAW State WA Zip Code 98022-9151

FEC ID number of contributing federal political committee. **C**

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt: 10 / 21 / 2010

Transaction ID: SA11.13945272

Amount of Each Receipt this Period: 25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. SANDRA J. CANCRO

Mailing Address 18514 SE 440TH STREET

City ENUMCLAW State WA Zip Code 98022-9151

FEC ID number of contributing federal political committee. **C**

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt: 10 / 25 / 2010

Transaction ID: SA11.13952557

Amount of Each Receipt this Period: 25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 75.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 322 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. LEE B. CANFIELD

Mailing Address 2500 N. LAKEVIEW AVENUE
APARTMENT 3204

City CHICAGO State IL Zip Code 60614-1829

FEC ID number of contributing federal political committee. **C**

Name of Employer M.W. MUTUAL LIFE Occupation SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13945326
Amount of Each Receipt this Period 30.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. FRANCIS X. CANNADAY

Mailing Address 363 W. BIRDIE DRIVE

City PUEBLO WEST State CO Zip Code 81007-6040

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13948700
Amount of Each Receipt this Period 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CHARLIE H. CANNON

Mailing Address 9415 HOLLY BLUFFS DR

City MECHANICSVILLE State VA Zip Code 23116-6640

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13929039
Amount of Each Receipt this Period 105.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 235.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 323 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. FRANK S. CANNON, USMC (RET.)
 Mailing Address 528 MOCKINGBIRD DR.
 City State Zip Code
LONG BEACH MS 39560-3100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
RETIRED RETIRED
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 0 / 2 0 1 0
Transaction ID: SA11.13943332
 Amount of Each Receipt this Period
 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. JAY PAUL CANNON
 Mailing Address 1221 GLENBROOK TERRACE
 City State Zip Code
NICHOLS HILLS OK 73116-5701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 850.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 9 / 2 0 1 0
Transaction ID: SA11.13932308
 Amount of Each Receipt this Period
 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. CRAIG G. CANTRELL
 Mailing Address 124 FAIROAKS CIR.
 City State Zip Code
GADSDEN AL 35901-5414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
RETIRED RETIRED
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 290.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 8 / 2 0 1 0
Transaction ID: SA11.13933418
 Amount of Each Receipt this Period
 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 200.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 324 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DR. CRAIG G. CANTRELL

Mailing Address 124 FAIROAKS CIR.

City State Zip Code
GADSDEN AL 35901-5414

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 290.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958340

Amount of Each Receipt this Period

35.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JAMES M. CANTRELL, JR.

Mailing Address 446 E MAIN ST.

City State Zip Code
MURFREESBORO TN 37130-3856

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948465

Amount of Each Receipt this Period

101.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. MIKE CANTRELL

Mailing Address PO BOX 582

City State Zip Code
ADA OK 74821-0582

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CANTREL ENERGY CORP. OWNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13945252

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2636.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 325 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
THOMAS L. CANTRELL

Mailing Address 912 LAYFIELD BRANCH ROAD

City State Zip Code
HAMILTON GA 31811-4108

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation HOME BUILDER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13938950

Amount of Each Receipt this Period
1.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAMES CANTY

Mailing Address 3151 ETON AVENUE
APARTMENT A

City State Zip Code
BERKELEY CA 94705-2703

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13951960

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. DOROTHY S. CAPPS

Mailing Address 1417 E CHURCH ST.

City State Zip Code
UNION CITY TN 38261-4201

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13945095

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1041.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 326 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. MICHAEL P. CAPRIA

Mailing Address 10104 LAKE COVE LN.

City State Zip Code
TAMPA FL 33618-4319

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt: MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13935665

Amount of Each Receipt this Period: 100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LOUISE E. CAPUANO, JR.

Mailing Address 4701 PARKTRAIL DRIVE

City State Zip Code
SANTA ROSA CA 95405-7939

FEC ID number of contributing federal political committee. **C**

Name of Employer THERMASOURCE Occupation ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt: MM / DD / YYYY
11 / 05 / 2010

Transaction ID: SA11.13966435

Amount of Each Receipt this Period: 75.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. SERGIO J. CARDELLO

Mailing Address 60 CIRCLE RD

City State Zip Code
STATEN ISLAND NY 10304-1261

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 801.00

Date of Receipt: MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13932914

Amount of Each Receipt this Period: 101.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **276.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 327 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. TERESA F. CARDEN
Mailing Address PO BOX 72014

City State Zip Code
DURHAM NC 27722-2014

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOSPITAL TRAVELER INC. PRESIDENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 550.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0
Transaction ID: SA11.13938477
Amount of Each Receipt this Period
50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. TERESA F. CARDEN
Mailing Address PO BOX 72014

City State Zip Code
DURHAM NC 27722-2014

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOSPITAL TRAVELER INC. PRESIDENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 550.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 0 / 2 0 1 0
Transaction ID: SA11.13971539
Amount of Each Receipt this Period
50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. ROBERTA J. CARDWELL
Mailing Address 34 PATTON DR

City State Zip Code
NEWPORT NEWS VA 23606-1747

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0
Transaction ID: SA11.13939559
Amount of Each Receipt this Period
200.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **300.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 328 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MR. PARKER CAREY</p> <p>Mailing Address 35 SCHOONER ST APT. 215</p> <p>City State Zip Code DAMARISCOTTA ME 04543-4052</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 220.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 1 0</p> <p>Transaction ID: SA11.13940209</p> <p>Amount of Each Receipt this Period 20.00</p> <p>CONTRIBUTION</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) MRS. PATRICIA J. CAREY</p> <p>Mailing Address N6738 JONATHAN DR</p> <p>City State Zip Code PARDEEVILLE WI 53954-9310</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 451.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 1 0</p> <p>Transaction ID: SA11.13930908</p> <p>Amount of Each Receipt this Period 1.00</p> <p>CONTRIBUTION</p>
---	--

<p>C. Full Name (Last, First, Middle Initial) MRS. PATRICIA J. CAREY</p> <p>Mailing Address N6738 JONATHAN DR</p> <p>City State Zip Code PARDEEVILLE WI 53954-9310</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 451.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0</p> <p>Transaction ID: SA11.13953153</p> <p>Amount of Each Receipt this Period 25.00</p> <p>CONTRIBUTION</p>
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<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>46.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 329 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. SHIRLEY A. CAREY

Mailing Address 564 CASTLEMAN RD.

City VESTAL State NY Zip Code 13850-6140

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt 10 / 20 / 2010

Transaction ID: SA11.13945030

Amount of Each Receipt this Period 20.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAMES P. CARINO

Mailing Address 138 MONTROSE AVE UNIT 29

City BRYN MAWR State PA Zip Code 19010-1561

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation SECURITY CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 14 / 2010

Transaction ID: SA11.13918751

Amount of Each Receipt this Period 55.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. LARRY B. CARLISLE

Mailing Address 701 S BLUEBIRD DRIVE

City AURORA State MO Zip Code 65605-1975

FEC ID number of contributing federal political committee. **C**

Name of Employer MWM/DEXTER Occupation MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 455.00

Date of Receipt 10 / 19 / 2010

Transaction ID: SA11.13931774

Amount of Each Receipt this Period 105.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 180.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 330 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. RACHEL MARIE CARLOW

Mailing Address P.O. BOX 125

City State Zip Code
BLOOMFIELD NE 68718-0125

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 305.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950837

Amount of Each Receipt this Period
35.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DON CARLSON

Mailing Address 11451 E SWEETWATER AVE

City State Zip Code
SCOTTSDALE AZ 85259-2520

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS OWNER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938807

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HARVEY D. CARLSON

Mailing Address 5419 COUNTY HIGHWAY 9

City State Zip Code
LYNN CENTER IL 61262-9504

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED FARMER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 455.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13960776

Amount of Each Receipt this Period
210.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 345.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 331 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MARIANE CARLTON FISHER

Mailing Address 3023 COBBLERS CROSSING RD

City State Zip Code
NEW ALBANY IN 47150-9455

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GREATER CLARK COUNTY SCHOOLS SUPERVISOR OF INSTRUCTIONAL SERVICES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938485

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MARIANE CARLTON FISHER

Mailing Address 3023 COBBLERS CROSSING RD

City State Zip Code
NEW ALBANY IN 47150-9455

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GREATER CLARK COUNTY SCHOOLS SUPERVISOR OF INSTRUCTIONAL SERVICES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13957688

Amount of Each Receipt this Period
75.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ANDREW CARNEY

Mailing Address 1838 NEWPORT BLVD

City State Zip Code
COSTA MESA CA 92627-2710

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
APEX DESIGN TECHNOLOGY SALESMAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929600

Amount of Each Receipt this Period
115.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **240.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 332 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. ELIZABETH CARNELL	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 6326 AUGUSTA CV	Transaction ID: SA11.13931895
	City State Zip Code DESTIN FL 32541-3465	Amount of Each Receipt this Period 110.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

B.	Full Name (Last, First, Middle Initial) B. CARPENTER	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 433 SKYLINE DR.	Transaction ID: SA11.13932574
	City State Zip Code VISTA CA 92084-5733	Amount of Each Receipt this Period 1.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1001.00	

C.	Full Name (Last, First, Middle Initial) B. CARPENTER	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 433 SKYLINE DR.	Transaction ID: SA11.13933441
	City State Zip Code VISTA CA 92084-5733	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1001.00	

SUBTOTAL of Receipts This Page (optional)	361.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 333 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. EDWIN L. CARPENTER		Date of Receipt
	Mailing Address 160 GLENDALE AVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 19 / 2010
	City	State	Zip Code
	UNION CITY	MI	49094-9313
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13972128
		Amount of Each Receipt this Period	
		<input type="text"/> 120.00	
Name of Employer RETIRED		Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 720.00	

B.	Full Name (Last, First, Middle Initial) JAY CARPENTER		Date of Receipt
	Mailing Address 16355 FOX CROSS DR.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 03 / 2010
	City	State	Zip Code
	GRANGER	IN	46530-9200
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13965314
		Amount of Each Receipt this Period	
		<input type="text"/> 110.00	
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 210.00	

C.	Full Name (Last, First, Middle Initial) MRS. JOAN CARPENTER		Date of Receipt
	Mailing Address 2885 PIEDMONT DR.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 15 / 2010
	City	State	Zip Code
	HIGHLAND	CA	92346-1773
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13928050
		Amount of Each Receipt this Period	
		<input type="text"/> 35.00	
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 220.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 265.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 334 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. EDWIN G. CARR

Mailing Address 405 HILLCREST DR.

City State Zip Code
RAVENSWOOD WV 26164-1425

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 290.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937319

Amount of Each Receipt this Period

30.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. DAVID S. CARROLL, JR.

Mailing Address 235 RIVEREDGE CV.

City State Zip Code
CORDOVA TN 38018-7735

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
USAGE DEFINED SOFTWARE SOFTWARE DEVELOPER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 365.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951479

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JAMES CARROLL

Mailing Address 2410 CLAREMONT DRIVE

City State Zip Code
FALLS CHURCH VA 22043-3024

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ACCENTURE GOVERNMENT AFFAIRS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959392

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

380.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 335 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
NANCY M. CARRUTH

Mailing Address P.O. BOX 267

City State Zip Code
BUNKIE LA 71322-0267

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation OWNER OF FARM LAND THAT IS RENTED OUT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	7	/	2	0	1	0

Transaction ID: SA11.13969856

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOSEPH M. CARSON, JR.

Mailing Address 101 WALNUT AVE.

City State Zip Code
SAINT CLAIRSVILLE OH 43950-1702

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation DAIRY OWNER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	8	/	2	0	1	0

Transaction ID: SA11.13971366

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. BEVERLY T. CARTER

Mailing Address P.O. BOX 328

City State Zip Code
FORT SUMNER NM 88119-0328

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	1	0

Transaction ID: SA11.13947130

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **700.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 336 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DEBORAH CARTER

Mailing Address 5746 DOBSON DRIVE

City State Zip Code
FAYETTEVILLE NC 28311-3451

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED ATTORNEY

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928872

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. DONALD CARTER

Mailing Address RR 2

City State Zip Code
WADENA MN 56482

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 396.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956953

Amount of Each Receipt this Period

60.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. FRANCES R. CARTER

Mailing Address 2433 FIELD CRESE RD

City State Zip Code
BELOIT WI 53511-1920

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 235.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956226

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

185.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 337 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. TROY A. CARTER

Mailing Address 695 N ASH DR

City State Zip Code
CHANDLER AZ 85224-8247

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 27 / 2010

Transaction ID: SA11.13955811

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOSEPH CARTINELLA

Mailing Address 515 TRINITY PL APT 2KN

City State Zip Code
WESTFIELD NJ 07090-3370

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 25 / 2010

Transaction ID: SA11.13954453

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
TELFRED CARTWRIGHT

Mailing Address 605 SE 2ND PL #4

City State Zip Code
GAINESVILLE FL 32601-6877

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED
Occupation RECYCLING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 18 / 2010

Transaction ID: SA11.13936205

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **250.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 338 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT E. CARY

Mailing Address 77-430 HOOMALUHIA DR
LOT 10

City State Zip Code
KAILUA KONA HI 96740

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CONA QUEEN COMPANY BEE KEEPER

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929591

Amount of Each Receipt this Period
130.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JACK H. CASE

Mailing Address 726 HARVARD DR

City State Zip Code
PLEASANT HILL CA 94523-1510

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
401.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943765

Amount of Each Receipt this Period
41.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. SANDRA K. CASEMENT

Mailing Address 28356 ALAVA

City State Zip Code
MISSION VIEJO CA 92692-1634

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954767

Amount of Each Receipt this Period
20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **191.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 339 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES CASEY

Mailing Address 347 OLD SHENNANDALE RD

City State Zip Code
CHARLES TOWN WV 25414-4783

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 690.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950043

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MARGIE E. CASEY

Mailing Address 6930 SUMNER ST.

City State Zip Code
LINCOLN NE 68506-1549

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 280.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941048

Amount of Each Receipt this Period
120.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. JEAN S. CASH

Mailing Address 111 S SALEM ST.

City State Zip Code
APEX NC 27502-1822

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963143

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 260.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 340 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. JEAN S. CASH

Mailing Address 111 S SALEM ST.

City State Zip Code
APEX NC 27502-1822

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963166

Amount of Each Receipt this Period

60.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. JOHANNA M. CASH

Mailing Address 1149 HOME PARK AVE

City State Zip Code
JANESVILLE WI 53545-4811

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 241.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936693

Amount of Each Receipt this Period

1.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. JOHANNA M. CASH

Mailing Address 1149 HOME PARK AVE

City State Zip Code
JANESVILLE WI 53545-4811

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 241.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944248

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

86.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 341 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RICHARD F. CASPER

Mailing Address 2505 E BRADFORD AVE
APT 3301

City State Zip Code
MILWAUKEE WI 53211-4264

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13947822

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHN CASSIDY, JR.

Mailing Address P.O. BOX 200

City State Zip Code
STROUD OK 74079-0200

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13969215

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LINDA CAST

Mailing Address 342 S HUMBOLDT DR.

City State Zip Code
HENDERSON NV 89074-1320

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940680

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 250.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 342 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ROBERT H. CASTELLINI

Mailing Address 312 ELM STREET, SUITE 2600
SUITE 2600

City State Zip Code
CINCINNATI OH 45202-2728

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CASTELLINI COMPANY CHAIRMAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13961171

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DR. THOMAS CASTELLOE

Mailing Address 3417 WILLIAMSBOROUGH CT

City State Zip Code
RALEIGH NC 27609-6368

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938677

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
JOSE MARTINEZ CASTILLO

Mailing Address P.O. BOX 352284

City State Zip Code
LOS ANGELES CA 90035-0259

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED DRIVER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952749

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10100.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 343 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
JOSE MARTINEZ CASTILLO

Mailing Address P.O. BOX 352284

City State Zip Code
LOS ANGELES CA 90035-0259

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED DRIVER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956653

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. PATRICIA C. CASTILLE

Mailing Address 167 CAMELIA DR

City State Zip Code
OPELOUSAS LA 70570-8675

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 501.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948462

Amount of Each Receipt this Period

101.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. MARJORIE ELIZABETH CASTLE

Mailing Address 3847 HAVENWOOD BLVD.

City State Zip Code
JACKSON MI 49201-9094

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 507.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949859

Amount of Each Receipt this Period

40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

191.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 344 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
RICARDO CASTRO

Mailing Address 128 EBONY AVE

City State Zip Code
BROWNSVILLE TX 78520-8012

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 445.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954368

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. GIOSAFAT CATALDO

Mailing Address 1401 1ST ST

City State Zip Code
VICTORIA VA 23974-9506

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MARINO'S ITALIAN RESTAURANT PIZZA & GR OWNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13969744

Amount of Each Receipt this Period
260.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. THOMAS R. CATANESE

Mailing Address 2201 MEMORY LN

City State Zip Code
WESTLAKE VILLAGE CA 91361-5524

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CATANESE & WELLS ATTORNEY

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 310.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945366

Amount of Each Receipt this Period
210.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

495.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 345 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. MARLENE J. CATHEY

Mailing Address 357 WEATHERIDGE DR

City State Zip Code
JACKSON TN 38305-6602

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	9	/	2	0	1	0

Transaction ID: SA11.13961846

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. W. SCOTT CAUCHOIS

Mailing Address 24 RICHARDSON WAY

City State Zip Code
PIEDMONT CA 94611-3517

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
381.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	4	/	2	0	1	0

Transaction ID: SA11.13930207

Amount of Each Receipt this Period
71.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. W. SCOTT CAUCHOIS

Mailing Address 24 RICHARDSON WAY

City State Zip Code
PIEDMONT CA 94611-3517

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
381.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	5	/	2	0	1	0

Transaction ID: SA11.13966417

Amount of Each Receipt this Period
80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **201.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 346 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. KENNETH D. CAUGHRON

Mailing Address 4141 S BRAESWOOD BOULEVARD APT
APT 358

City HOUSTON State TX Zip Code 77025

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950523

Amount of Each Receipt this Period: 35.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DANIEL P. CAULKINS

Mailing Address 57 SOUTHSIDE COUNTRY CLUB

City DECATUR State IL Zip Code 62521-9125

FEC ID number of contributing federal political committee. **C**

Name of Employer PATTERSON HOUSE, INC. Occupation SELF-EMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942995

Amount of Each Receipt this Period: 50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DANIEL P. CAULKINS

Mailing Address 57 SOUTHSIDE COUNTRY CLUB

City DECATUR State IL Zip Code 62521-9125

FEC ID number of contributing federal political committee. **C**

Name of Employer PATTERSON HOUSE, INC. Occupation SELF-EMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13964566

Amount of Each Receipt this Period: 100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 185.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 347 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MARY CAUSEY

Mailing Address 26312 TURKEY RIDGE ROAD

City State Zip Code
BUSH LA 70431-2343

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13928832

Amount of Each Receipt this Period
150.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. J.L. CAUTHEN

Mailing Address 1500 LAKE RD. APT. 10

City State Zip Code
BELTON TX 76513-1340

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13955158

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. JOHNNY L. CAUZOS, M.D.

Mailing Address 2 WESTPOINT DRIVE

City State Zip Code
MISSOURI CITY TX 77459-6331

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	1	0

Transaction ID: SA11.13958251

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **5190.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 348 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. JUDITH CAVALLO

Mailing Address 2322 CANYONBACK RD

City State Zip Code
LOS ANGELES CA 90049-6811

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 555.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951470

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. LINDA M. CAVANAUGH

Mailing Address 7025 GARRISON CT

City State Zip Code
DAYTON OH 45459-3447

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935672

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. WYLIE D. CAVIN, III

Mailing Address 6409 LANDMARK DRIVE

City State Zip Code
ALEXANDRIA LA 71301-2344

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RED RIVER BANK BANKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940444

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 349 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. EDO S. CECIC

Mailing Address 2537 S 6TH. AVE

City RIVERSIDE State IL Zip Code 60546-1243

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS

Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt: 10 / 18 / 2010

Transaction ID: SA11.13934838

Amount of Each Receipt this Period: 40.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. EDO S. CECIC

Mailing Address 2537 S 6TH. AVE

City RIVERSIDE State IL Zip Code 60546-1243

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS

Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt: 10 / 18 / 2010

Transaction ID: SA11.13936615

Amount of Each Receipt this Period: 1.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. EDO S. CECIC

Mailing Address 2537 S 6TH. AVE

City RIVERSIDE State IL Zip Code 60546-1243

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS

Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt: 10 / 27 / 2010

Transaction ID: SA11.13958303

Amount of Each Receipt this Period: 40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 81.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 350 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. SARAH M. GEJKA
Mailing Address 1751 MCROBERTS RD
City CEDAR RAPIDS State IA Zip Code 52403-9066
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 435.00
Date of Receipt 11 / 03 / 2010
Transaction ID: SA11.13965304
Amount of Each Receipt this Period 235.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. JEANNE JEANNE CENSKY
Mailing Address 1626 S 18TH ST
City MANITOWOC State WI Zip Code 54220-6059
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00
Date of Receipt 10 / 21 / 2010
Transaction ID: SA11.13947080
Amount of Each Receipt this Period 200.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID CENTANNI
Mailing Address 606 E 8TH ST
City HOUSTON State TX Zip Code 77007-1718
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 390.00
Date of Receipt 10 / 21 / 2010
Transaction ID: SA11.13946870
Amount of Each Receipt this Period 235.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 670.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 351 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. LAWRENCE CERIELLO

Mailing Address 401 9TH STREET, NW
SUITE 900

City State Zip Code
WASHINGTON DC 20004-2145

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NIXON & PEABODY ATTORNEY

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1199.00

Date of Receipt
MM / DD / YYYY
11 / 10 / 2010

Transaction ID: SA11.13968694

Amount of Each Receipt this Period
1199.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOSEPH F. CERNIGLIA

Mailing Address 1404 THOMAS ST

City State Zip Code
GRETNA LA 70053-5639

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13936862

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOSEPH F. CERNIGLIA

Mailing Address 1404 THOMAS ST

City State Zip Code
GRETNA LA 70053-5639

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt
MM / DD / YYYY
11 / 16 / 2010

Transaction ID: SA11.13969184

Amount of Each Receipt this Period
75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1374.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 352 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOHN CERVIN, JR.
Mailing Address 815A HILLTOP AVENUE EXT.
City ABINGDON State MD Zip Code 21009-1306
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 290.00
Date of Receipt 11 / 16 / 2010
Transaction ID: SA11.13969173
Amount of Each Receipt this Period 40.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
IVAN CHADBOURNE
Mailing Address 18 CASTLE RD
City HARMONY State ME Zip Code 04942-7214
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation TRUCK DRIVER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13933339
Amount of Each Receipt this Period 101.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. VAISHALI CHADHA
Mailing Address 1440 OAK RIM DRIVE
City HILLSBOROUGH State CA Zip Code 94010-7356
FEC ID number of contributing federal political committee. **C**
Name of Employer HOMEMAKER Occupation HOMEMAKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 30400.00
Date of Receipt 10 / 28 / 2010
Transaction ID: SA11.13961202
Amount of Each Receipt this Period 30400.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 30541.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 353 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. HELEN BREWER CHADWICK

Mailing Address 83 WARREN AVE

City State Zip Code
PLYMOUTH MA 02360-2437

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 386.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943265

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. THOMAS M. CHADWICK

Mailing Address P.O. BOX 397
P.O. BOX 397

City State Zip Code
HAMMONDSPORT NY 14840-0397

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952890

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. EDWARD R R CHAHIN

Mailing Address 13163 SW 91ST PL

City State Zip Code
MIAMI FL 33176-5838

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 361.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954160

Amount of Each Receipt this Period
20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **160.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 354 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. EDMUND S. CHAMBERS

Mailing Address 66 CREST AVE

City ALAMO State CA Zip Code 94507-2648

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13943914
Amount of Each Receipt this Period: 200.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GEORGE CHAMBERS

Mailing Address 1130 AIRLINE DR.

City BOSSIER CITY State LA Zip Code 71112-3026

FEC ID number of contributing federal political committee. **C**

Name of Employer RANCLAND Occupation SELF-EMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt: 10 / 14 / 2010
Transaction ID: SA11.13930762
Amount of Each Receipt this Period: 101.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JAMES D. CHAMBERS

Mailing Address 377 COUNTY ROAD 3555

City PARADISE State TX Zip Code 76073-4033

FEC ID number of contributing federal political committee. **C**

Name of Employer CONVERTEAM INC Occupation MARINE ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13945128
Amount of Each Receipt this Period: 60.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 361.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 355 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JOHN S. CHAMBERLAIN

Mailing Address 182 FAIRWAY DRIVE

City State Zip Code
PRINCETON NJ 08540-2410

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 5 / 2 0 1 0

Transaction ID: SA11.13966164

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. KATHERYN R. CHAMBLISS

Mailing Address 122 WOODLANDS GLEN CIR.

City State Zip Code
BRANDON MS 39047-7107

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944238

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. MARGARET CHAMBERS

Mailing Address 3 DUNNING WAY

City State Zip Code
JAMAICA PLAIN MA 02130

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13972827

Amount of Each Receipt this Period

30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

380.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MR. GERARD L. CHAMPSAUR</p> <p>Mailing Address 1430 CHANNING AVE.</p> <p>City State Zip Code PALO ALTO CA 94301-3024</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer INFORMATION REQUESTED PER BEST EFFORTS</p> <p>Occupation INFORMATION REQUESTED PER BEST EFFORTS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 600.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0</p> <p>Transaction ID: SA11.13949961</p> <p>Amount of Each Receipt this Period 400.00</p> <p>CONTRIBUTION</p>
--	--

<p>B. Full Name (Last, First, Middle Initial) MR. MARTIN W. CHANCE</p> <p>Mailing Address 425 E SOUTH AVE</p> <p>City State Zip Code CHENEY KS 67025</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer NEAL CHANCE RACING CONVERTERS</p> <p>Occupation PRESIDENT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 230.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 1 0</p> <p>Transaction ID: SA11.13960732</p> <p>Amount of Each Receipt this Period 230.00</p> <p>CONTRIBUTION</p>
--	--

<p>C. Full Name (Last, First, Middle Initial) ALFRED CHANDLER, JR.</p> <p>Mailing Address P.O. BOX 453</p> <p>City State Zip Code RCHO SANTA FE CA 92067-0453</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer RETIRED</p> <p>Occupation RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 450.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 1 0</p> <p>Transaction ID: SA11.13934981</p> <p>Amount of Each Receipt this Period 120.00</p> <p>CONTRIBUTION</p>
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SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 357 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. PAUL T. CHANDLER

Mailing Address 6694 APACHE CIR.

City State Zip Code
CINCINNATI OH 45243-2404

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation M.D.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13952712

Amount of Each Receipt this Period
35.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. R. CHANDRASEKHARAN

Mailing Address 1210 E 8TH ST
STE 1

City State Zip Code
WESLACO TX 78596-7120

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13928938

Amount of Each Receipt this Period
150.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. R. CHANDRASEKHARAN

Mailing Address 1210 E 8TH ST
STE 1

City State Zip Code
WESLACO TX 78596-7120

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	6	/	2	0	1	0

Transaction ID: SA11.13968516

Amount of Each Receipt this Period
150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **335.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 358 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DR. HAROLD L. CHAPEL

Mailing Address 4667 W 21ST STREET CIR

City State Zip Code
GREELEY CO 80634-3265

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NORTH COLORADO CARDIOLOGY HEALTH CARE WORKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1210.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962636

Amount of Each Receipt this Period

210.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. GILES L. CHAPIN

Mailing Address 407 BRIDGE STREET

City State Zip Code
CHATHAM MA 02633-2500

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Transaction ID: SA11.13968083

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. DAVE B. CHAPMAN

Mailing Address P.O. BOX 4009

City State Zip Code
HAMDEN CT 06514-0009

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940152

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

285.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 359 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DON CHAPMAN, JR.
Mailing Address P.O. BOX 228

City State Zip Code
CHILLICOTHE MO 64601-0228

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CHAPMAN, COWARD, TURNER, SHASN ATTORNEY

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937322

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DOUGLAS CHAPMAN
Mailing Address 2394 DONAMERE CIR.

City State Zip Code
CENTERVILLE OH 45459-5179

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SRA ENGINEER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951096

Amount of Each Receipt this Period
400.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. J CHAPMAN
Mailing Address 216 BUFFALO ST

City State Zip Code
FREEPORT PA 16229-1304

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 241.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953815

Amount of Each Receipt this Period
1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 501.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 360 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
LEONARD T. CHAPMAN

Mailing Address 13760 CHANDLER BLVD

City State Zip Code
SHERMAN OAKS CA 91401-5812

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961726

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. VICTOR IRVIN CHAPMAN

Mailing Address 4201 CLARK LN. LOT 69

City State Zip Code
COLUMBIA MO 65202-4167

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
545.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958626

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DONALD R. CHAPPEL

Mailing Address 305 EAST 19TH STREET

City State Zip Code
TULSA OK 74120-7412

FEC ID number of contributing federal political committee. **C**

Name of Employer WILLIAMS
Occupation SENIOR VP AND CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13948206

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1225.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 361 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. LARRY F. CHARBONNEAU

Mailing Address 5711 CANNON LAKE TRL

City State Zip Code
FARIBAULT MN 55021-8526

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation CONSULTANT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13948220

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LARRY F. CHARBONNEAU

Mailing Address 5711 CANNON LAKE TRL

City State Zip Code
FARIBAULT MN 55021-8526

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation CONSULTANT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	9	/	2	0	1	0

Transaction ID: SA11.13966561

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. E P. CHARLTON, II

Mailing Address 1030 PARROTT DR

City State Zip Code
HILLSBOROUGH CA 94010-7401

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 401.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	1	0

Transaction ID: SA11.13948573

Amount of Each Receipt this Period

101.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

251.00

TOTAL This Period (last page this line number only) ►

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**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 362 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) BONNIE CICOLETTI CHASE		Date of Receipt
	Mailing Address 712 VIA LIDO NORD		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	NEWPORT BEACH	CA	92663-5523
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13956165
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="450.00"/>	<input type="text" value="240.00"/>
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) DR. HOLLACE D. CHASTAIN, II		Date of Receipt
	Mailing Address 1819 BRAEMAR DRIVE		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	FORT WAYNE	IN	46814-9364
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer PARKVIEW HEALTH		Occupation CARDIOLOGIST	Transaction ID: SA11.13947741
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="4000.00"/>	<input type="text" value="1000.00"/>
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) MR. NEAL A. CHASTAIN		Date of Receipt
	Mailing Address 4022-18TH ST #12C		<input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	LUBBOCK	TX	79416-6027
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer RETIRED		Occupation RETIRED	Transaction ID: SA11.13965253
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="955.00"/>	<input type="text" value="200.00"/>
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1440.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 363 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. STEPHEN I. CHAZEN

Mailing Address P.O. BOX 427

City State Zip Code
PACIFIC PALISADES CA 90272-0427

FEC ID number of contributing federal political committee. **C**

Name of Employer OCCIDENTAL PETROLEUM CORP. Occupation CORPRATE OFFICER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 13000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13932328

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. MARVIN CHEITEN

Mailing Address 35 MEADOWBROOK DRIVE

City State Zip Code
PRINCETON NJ 08540-3627

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation WRITER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935661

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. ANNIE CHEN

Mailing Address 8111 AVINGER DR.

City State Zip Code
ROSEMEAD CA 91770-3928

FEC ID number of contributing federal political committee. **C**

Name of Employer KAISER PERMANENTE MEDICAL GROUP Occupation MEDICAL CARE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 276.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930602

Amount of Each Receipt this Period
21.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **5221.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 364 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. STEVE CHENG	Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 1 0
	Mailing Address 325 WEST 56TH STREET APARTMENT 34A	Transaction ID: SA11.13932253
	City NEW YORK State NY Zip Code 10019-3703	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer CREDIT SUISSE Occupation INVESTMENT BANKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 500.00	

B.	Full Name (Last, First, Middle Initial) MS. STELLA CHENHALL	Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	Mailing Address 527 GRANT TERRACE	Transaction ID: SA11.13947781
	City TAFT State CA Zip Code 93268-4433	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 300.00	

C.	Full Name (Last, First, Middle Initial) MS. STELLA CHENHALL	Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0
	Mailing Address 527 GRANT TERRACE	Transaction ID: SA11.13961898
	City TAFT State CA Zip Code 93268-4433	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 300.00	

SUBTOTAL of Receipts This Page (optional)	700.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 365 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ALBERT CHERVANIK		Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 309 N 9TH ST		Transaction ID: SA11.13944929
	City SUNBURY	State PA	Zip Code 17801-2041
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
	Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	

B.	Full Name (Last, First, Middle Initial) MR. GARY CHESHIRE		Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 4009 SEGO LILLY ROAD		Transaction ID: SA11.13948635
	City DIANA	State TX	Zip Code 75640-3403
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

C.	Full Name (Last, First, Middle Initial) MR. ALEXANDER CHETCUTI		Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 21712 BEAUFORD LANE		Transaction ID: SA11.13931287
	City NORTHVILLE	State MI	Zip Code 48167-9083
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
	Name of Employer QUALITY METRLCLAFF INC	Occupation L.O.B.	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00	

SUBTOTAL of Receipts This Page (optional) ▶

250.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 366 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ALEXANDER CHETCUTI

Mailing Address 21712 BEAUFORD LANE

City State Zip Code
NORTHVILLE MI 48167-9083

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
QUALITY METRLCLAFF INC L.O.B.

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 8 / 2 0 1 0

Transaction ID: SA11.13966799

Amount of Each Receipt this Period

80.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. CYNTHIA CHEVIRON

Mailing Address 4010 S. LAKE CT.

City State Zip Code
DECATUR IL 62521-8438

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941093

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. CYNTHIA CHEVIRON

Mailing Address 4010 S. LAKE CT.

City State Zip Code
DECATUR IL 62521-8438

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957212

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

180.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 367 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MILLARD CHIANG

Mailing Address 200 E 69TH ST., APT. 39A

City State Zip Code
NEW YORK NY 10021-5747

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SALES

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 480.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13960768

Amount of Each Receipt this Period
210.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SGT. GUS T. CHILDS

Mailing Address 12348 STATE HIGHWAY 87 N

City State Zip Code
TIMPSON TX 75975-4105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 430.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13946633

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ROBERT L. CHILES

Mailing Address 1003 FAIRWAY SEVEN

City State Zip Code
VILLA RICA GA 30180-5830

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 201.00

Date of Receipt
MM / DD / YYYY
10 / 20 / 2010

Transaction ID: SA11.13944063

Amount of Each Receipt this Period
101.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 411.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 368 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. SYLVIA P. CHIOFOLO

Mailing Address 323 CALVIN DR.

City State Zip Code
SALISBURY MD 21804-8626

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 202.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935050

Amount of Each Receipt this Period
20.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PHILIP CHISHOLM

Mailing Address 6540 BUFFALO SPEEDWAY

City State Zip Code
WEST UNIVERSITY PL TX 77005-3831

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PAGE SOUTHERLAND PAGE ARCHITECTS MEDICAL PLANNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918846

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PHILIP CHISHOLM

Mailing Address 6540 BUFFALO SPEEDWAY

City State Zip Code
WEST UNIVERSITY PL TX 77005-3831

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PAGE SOUTHERLAND PAGE ARCHITECTS MEDICAL PLANNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945572

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **70.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 369 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
JOHN T. CHITTON

Mailing Address 229 LEE ROAD 716

City State Zip Code
AUBURN AL 36830-8534

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936970

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. SONYA CHOPRA

Mailing Address 122 GREEN VALLEY LANE

City State Zip Code
MCMURRAY PA 15317-3542

FEC ID number of contributing federal political committee. **C**

Name of Employer
SELF-EMPLOYED

Occupation
ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13957948

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. DAVID H. CHRISTENSEN

Mailing Address 7000 SE RIVERSIDE DR

City State Zip Code
VANCOUVER WA 98664-1674

FEC ID number of contributing federal political committee. **C**

Name of Employer
CHRISTENSEN SHIPYARDS L.
T. D.

Occupation
PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
670.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13947783

Amount of Each Receipt this Period

420.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1670.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 370 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MISS JANET CHRISTIE

Mailing Address 319 N TACOMA AVE
APT 1004

City TACOMA State WA Zip Code 98403-2716

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13928829
Amount of Each Receipt this Period 35.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOANNE CHRISTENSEN

Mailing Address 6453 S PRESCOTT ST

City LITTLETON State CO Zip Code 80120-3130

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 15 / 2010
Transaction ID: SA11.13928335
Amount of Each Receipt this Period 50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. JOHN G. CHRISTENSEN

Mailing Address 308 RANDALL RD
C

City GENEVA State IL Zip Code 60134-4201

FEC ID number of contributing federal political committee. **C**

Name of Employer ILL. UROLOGICAL INSTITUTE Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 28 / 2010
Transaction ID: SA11.13957656
Amount of Each Receipt this Period 300.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 385.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 371 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. JUNE CHRISTENSEN

Mailing Address 24 COLLEGE VIEW CT.

City State Zip Code
BREVARD NC 28712-4648

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
276.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949094

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. NEIL E. CHRISTOPHER

Mailing Address 3301 GRIFFITH LN

City State Zip Code
GUNTERSVILLE AL 35976-2717

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
303.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932659

Amount of Each Receipt this Period
51.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. NOEL L. CHRISTENSEN

Mailing Address 25831 EMMERSON ST

City State Zip Code
LOMA LINDA CA 92354-3910

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13931468

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **276.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 372 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
OAKLEY CHRISTIAN

Mailing Address 3608 CHALMETTE CT

City State Zip Code
NASHVILLE TN 37215-1001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CO CHRISTIAN CONTRACTOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 361.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941909

Amount of Each Receipt this Period

160.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ROBERT A. CHRISTOPHER

Mailing Address 27891 N 100TH WAY

City State Zip Code
SCOTTSDALE AZ 85262-8929

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 6500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956746

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
RUTH I. CHRISP

Mailing Address 818- 17TH ST

City State Zip Code
AUBURN NE 68305-2215

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 310.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918433

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1260.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 373 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. JESSIE CHU

Mailing Address 31063 E SUNSET DR N

City State Zip Code
REDLANDS CA 92373-7454

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOUSEKEEPER HOUSEKEEPER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Transaction ID: SA11.13967758

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
PAUL B. CHUCHEL

Mailing Address 520 CHEROKEE RD.

City State Zip Code
LAKE FOREST IL 60045-3157

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936235

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
JIM CHUDLEIGH

Mailing Address P.O. BOX 10807

City State Zip Code
AUSTIN TX 78766-1807

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954777

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 374 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. DORIS M. CHURCH

Mailing Address 1973 DUNLOE CIR.

City State Zip Code
DUNEDIN FL 34698-3237

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 910.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13960712

Amount of Each Receipt this Period
410.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN CHURCHILL

Mailing Address 19 FOREST VIEW DR

City State Zip Code
ASHEVILLE NC 28804-2318

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
11 / 18 / 2010

Transaction ID: SA11.13971345

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CHRISTIAN CIAMPAGLIA

Mailing Address 3279 TELESKA RD. SE

City State Zip Code
PALM BAY FL 32909-7356

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
10 / 28 / 2010

Transaction ID: SA11.13959674

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **500.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 375 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. ROBERT C. CIARDULLO

Mailing Address 135 OSBORN RD

City State Zip Code
HARRISON NY 10528-1017

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation SURGEON

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 850.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935560

Amount of Each Receipt this Period
300.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. SAMUEL R. CICALESE

Mailing Address 47 SMITHFIELD COURT

City State Zip Code
BASKING RIDGE NJ 07920-2780

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1100.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13957677

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RICHARD A. CICERCHI

Mailing Address 9900 LORAIN AVE

City State Zip Code
CLEVELAND OH 44102-4637

FEC ID number of contributing federal political committee. **C**

Name of Employer CICERCHI DEVELOPMENT COMP-ANY Occupation C.E.O.

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 310.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945333

Amount of Each Receipt this Period
35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **435.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 376 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
PABLO CISILINO

Mailing Address 755 PARK AVENUE

City State Zip Code
NEW YORK NY 10021-4255

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
STONE HARBOR PORTFOLIO MANAGER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928475

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. DANIEL M. CISLO

Mailing Address 1333 2ND STREET
SUITE 500

City State Zip Code
SANTA MONICA CA 90401-4100

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CISLO & THOMAS LLP PATENT ATTORNEY

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13928409

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. LISA CISLO

Mailing Address 1333 2ND STREET
SUITE 500

City State Zip Code
SANTA MONICA CA 90401-4110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SOTHEBY'S REAL ESTATE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13932257

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3250.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 377 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOEL CITRON

Mailing Address 483 TENTH AVE.

City State Zip Code
NEW YORK NY 10018-1118

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TENTH AVENUE HOLDINGS LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2010

Transaction ID: SA11.13962852

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BOB CLACK

Mailing Address 1410 BLUE RIDGE TRL

City State Zip Code
WAUNAKEE WI 53597-2373

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CLACK CORP.ROOM MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt
MM / DD / YYYY
11 / 22 / 2010

Transaction ID: SA11.13973000

Amount of Each Receipt this Period
1.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. NAOMI R. CLADY

Mailing Address 1140 LAVINA AVE

City State Zip Code
BUCYRUS OH 44820-3036

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13942541

Amount of Each Receipt this Period
35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1036.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 378 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. NAOMI R. CLADY

Mailing Address 1140 LAVINA AVE

City State Zip Code
BUCYRUS OH 44820-3036

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2010

Transaction ID: SA11.13965796

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ANDREW L. CLARKE

Mailing Address 4767 MARSH HAMMOCK DR. E

City State Zip Code
JACKSONVILLE FL 32224-1879

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13931598

Amount of Each Receipt this Period
60.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. ANNE R. CLARK

Mailing Address 425 WINN WAY APT. 102

City State Zip Code
DECATUR GA 30030-1733

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2010

Transaction ID: SA11.13956535

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 210.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 379 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. BARABARA CLARK

Mailing Address 5401 WENTWORTH LN

City State Zip Code
MUNCIE IN 47304-7601

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 290.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918631

Amount of Each Receipt this Period

75.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
BARBARA W. CLARK

Mailing Address 301 LOCK LN S

City State Zip Code
RICHMOND VA 23226-1713

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961876

Amount of Each Receipt this Period

350.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
CHARLES B. CLARK

Mailing Address 1051 W CANYON CREEK CT

City State Zip Code
WATKINSVILLE GA 30677-1555

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13962441

Amount of Each Receipt this Period

30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

455.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 380 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. EDWARD M. CLARK, DDS

Mailing Address 5211 YELLOWSTONE RD.
SUITE 1

City State Zip Code
CHEYENNE WY 82009-4790

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DENTIST SELF-EMPLOYED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13951068

Amount of Each Receipt this Period
300.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. ELLOINE CLARK

Mailing Address 3716 MAPLEWOOD AVE

City State Zip Code
DALLAS TX 75205-2827

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 620.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13964646

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GARY J. CLARK

Mailing Address 259 WOOD LAKE DR

City State Zip Code
MAITLAND FL 32751-3155

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958400

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 900.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 381 / 3187
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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JAMES CLARK

Mailing Address 3813 DURBIN ST

City State Zip Code
BALDWIN PARK CA 91706-6804

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948287

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOSEPH F. CLARK

Mailing Address 5064 COUNTRY CLUB DR.

City State Zip Code
HIGH RIDGE MO 63049-3500

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939574

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. KATHLEEN M. CLARK

Mailing Address 28845 COUNTRYSIDE DRIVE

City State Zip Code
AGOURA HILLS CA 91301-2748

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2400.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13948208

Amount of Each Receipt this Period
2400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **2700.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 382 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. KITTY CLARK

Mailing Address 3843 WEST RD

City State Zip Code
TURIN NY 13473-2307

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CJ LOGGING ACCOUNTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962653

Amount of Each Receipt this Period
35.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LANCE E. CLARK

Mailing Address 708 FOXWOOD COURT WEST

City State Zip Code
GRAND JUNCTION CO 81507-8765

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SKYDANCE HELICOPTORS PILOT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951583

Amount of Each Receipt this Period
175.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LORI A. CLARK

Mailing Address 11129 WINDY WILLOWS

City State Zip Code
HELOTES TX 78023-3427

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959517

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **235.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 383 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. LYNNE CLARK

Mailing Address 981 OLD FARM RD.

City THOUSAND OAKS State CA Zip Code 91360-4939

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 410.00

Date of Receipt 10 / 18 / 2010

Transaction ID: SA11.13929650

Amount of Each Receipt this Period 75.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MARGARET A. CLARK

Mailing Address 351 KINGS DR

City PINEVILLE State LA Zip Code 71360-2502

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 405.00

Date of Receipt 10 / 18 / 2010

Transaction ID: SA11.13928874

Amount of Each Receipt this Period 210.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT S. CLARKE

Mailing Address 1412 SYCAMORE AVENUE

City FULLERTON State CA Zip Code 92831-2128

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 202.00

Date of Receipt 10 / 26 / 2010

Transaction ID: SA11.13957136

Amount of Each Receipt this Period 101.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 386.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 384 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ROGER W. CLARK

Mailing Address 933 RADCLIFFE AVE

City State Zip Code
BAKERSFIELD CA 93305-1127

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 355.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13931274

Amount of Each Receipt this Period
10.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. WILLIAM SHELTON CLARK

Mailing Address 9204 KNOLL CREST LOOP

City State Zip Code
AUSTIN TX 78759-7134

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EBERLINE SERVICES INC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944593

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. WILLIAM SHELTON CLARK

Mailing Address 9204 KNOLL CREST LOOP

City State Zip Code
AUSTIN TX 78759-7134

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EBERLINE SERVICES INC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944628

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **210.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 385 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
AMOS W. CLARY

Mailing Address 7101 COACHMAN LN. APT. 201

City State Zip Code
HENRICO VA 23228-4054

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943654

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
AMOS W. CLARY

Mailing Address 7101 COACHMAN LN. APT. 201

City State Zip Code
HENRICO VA 23228-4054

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950461

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
AMOS W. CLARY

Mailing Address 7101 COACHMAN LN. APT. 201

City State Zip Code
HENRICO VA 23228-4054

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 1 0

Transaction ID: SA11.13965963

Amount of Each Receipt this Period
35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 100.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 386 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
AMOS W. CLARY

Mailing Address 7101 COACHMAN LN. APT. 201

City State Zip Code
HENRICO VA 23228-4054

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13973228

Amount of Each Receipt this Period
35.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GEORGE E. CLAUSEN

Mailing Address 11 ASH RD

City State Zip Code
FREEDOM NH 03836-4800

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED INVESTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 207.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933178

Amount of Each Receipt this Period
101.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RALPH R. CLAYTON

Mailing Address 400 W 8TH. TER. APT. A

City State Zip Code
LAWSON MO 64062-9381

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 272.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13962336

Amount of Each Receipt this Period
15.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 151.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM K. CLAYTOR

Mailing Address 2015 SPOONBILL ST

City State Zip Code
JACKSONVILLE FL 32224-2327

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
THE HASKELL COMPANY PROJECT DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt **10 / 26 / 2010**

Transaction ID: SA11.13956880

Amount of Each Receipt this Period **110.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DON E. CLEARWATER

Mailing Address 8674 MULETOWN RD

City State Zip Code
REDDING CA 96001-9516

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **305.00**

Date of Receipt **10 / 19 / 2010**

Transaction ID: SA11.13931754

Amount of Each Receipt this Period **25.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RICHARD CLEARMAN

Mailing Address 3846 LEXINGTON AVE

City State Zip Code
MISSOULA MT 59808-5205

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **10 / 18 / 2010**

Transaction ID: SA11.13936167

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) **235.00**

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 388 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. MARY S. CLECKLEY
 Mailing Address 463 SUMMIT RIDGE DR
 City State Zip Code
 LAWRENCEVILLE GA 30046-6043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 740.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 9 / 2 0 1 0
Transaction ID: SA11.13940647
 Amount of Each Receipt this Period
 60.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. MARY S. CLECKLEY
 Mailing Address 463 SUMMIT RIDGE DR
 City State Zip Code
 LAWRENCEVILLE GA 30046-6043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 740.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 2 / 2 0 1 0
Transaction ID: SA11.13948769
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. MARY S. CLECKLEY
 Mailing Address 463 SUMMIT RIDGE DR
 City State Zip Code
 LAWRENCEVILLE GA 30046-6043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 740.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 5 / 2 0 1 0
Transaction ID: SA11.13952551
 Amount of Each Receipt this Period
 101.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 261.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 389 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. MARY S. CLECKLEY

Mailing Address 463 SUMMIT RIDGE DR

City State Zip Code
LAWRENCEVILLE GA 30046-6043

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 740.00

Date of Receipt
MM / DD / YYYY
11 / 16 / 2010

Transaction ID: SA11.13969303

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. AMELIA M. CLEMENTS

Mailing Address 1579 LENORE ROAD

City State Zip Code
COXS CREEK KY 40013-7668

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13941911

Amount of Each Receipt this Period
60.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CHRISTOPHER W. CLEMENTS

Mailing Address PO BOX 27506

City State Zip Code
TUCSON AZ 85726-7506

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GOLDEN EAGLE DISTRIBUTORS INC. SALES EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13942495

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 2660.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 390 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT M. CLEMENTS

Mailing Address 4667 ORTEGA BLVD.

City JACKSONVILLE State FL Zip Code 32210-7633

FEC ID number of contributing federal political committee. **C**

Name of Employer EVERBANK Occupation CHAIRMAN & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13942513
 Amount of Each Receipt this Period: 1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. FRANCIS D. CLEPPER

Mailing Address 1413 ESTATES DR

City SEYMOUR State TN Zip Code 37865-4204

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13954971
 Amount of Each Receipt this Period: 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES H. CLICK, JR.

Mailing Address 6403 E MIRAMAR DRIVE

City TUCSON State AZ Zip Code 85715-3118

FEC ID number of contributing federal political committee. **C**

Name of Employer JIM CLICK AUTOMOTIVE Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 29000.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA11.13932333
 Amount of Each Receipt this Period: 19000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 20100.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 391 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. VICKI M. CLICK

Mailing Address 6403 EAST MIRAMAR DRIVE

City State Zip Code
TUCSON AZ 85715-3118

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 30400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13932346

Amount of Each Receipt this Period

30400.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. BARBARA A. CLIFFORD

Mailing Address 9213 W. H. BURGESS DR.

City State Zip Code
EL PASO TX 79925-5116

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1536.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962713

Amount of Each Receipt this Period

75.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. C G. CLIFFORD

Mailing Address 3890 COOPERVILLE RD

City State Zip Code
PELAHATCHIE MS 39145-3505

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 251.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944141

Amount of Each Receipt this Period

1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

30476.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 392 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. C G. CLIFFORD

Mailing Address 3890 COOPERVILLE RD

City PELAHATCHIE State MS Zip Code 39145-3505

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13944493
 Amount of Each Receipt this Period: 40.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. HELEN W. CLIFFORD

Mailing Address 3890 COOPERVILLE RD.

City PELAHATCHIE State MS Zip Code 39145-3505

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 485.00

Date of Receipt: 11 / 01 / 2010
Transaction ID: SA11.13963665
 Amount of Each Receipt this Period: 40.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT F. CLIFF, II

Mailing Address 6029 ERINBLAIR LOOP

City HAYMARKET State VA Zip Code 20169-2613

FEC ID number of contributing federal political committee. **C**

Name of Employer MANTECH INTL. Occupation TECHNICAL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 661.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13937109
 Amount of Each Receipt this Period: 235.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 315.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 393 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JOHN CLINE

Mailing Address
325 7TH ST. NE SUITE 400

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
C2 GROUP LLC PARTNER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11A.13977525

Amount of Each Receipt this Period
250.00

IN-KIND CONTRIBUTION

IN-KIND: FOOD AND BEVERAGE

B. Full Name (Last, First, Middle Initial)
MS. KAREN CLINE

Mailing Address 24 CLINE RIVER ROAD

City State Zip Code
GROTTOES VA 24441-4303

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 308.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936151

Amount of Each Receipt this Period
104.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. KAREN CLINE

Mailing Address 24 CLINE RIVER ROAD

City State Zip Code
GROTTOES VA 24441-4303

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 308.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937422

Amount of Each Receipt this Period
104.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 458.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 394 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. THOMAS X. CLINTON

Mailing Address 459 OAKLEAF CT.

City	State	Zip Code
SIDNEY	OH	45365-2556

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 451.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932958

Amount of Each Receipt this Period

101.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ANTHONY P. CLOUGHERTY

Mailing Address 500 NEWPORT CENTER DRIVE
SUITE 910

City	State	Zip Code
NEWPORT BEACH	CA	92660-7009

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00
---	-------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13951127

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. BERNARD J. CLOUGHERTY

Mailing Address 500 NEWPORT CENTER DRIVE
SUITE 910

City	State	Zip Code
NEWPORT BEACH	CA	92660-7009

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00
---	-------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13951123

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

4101.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 395 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOSEPH D. CLOUGHERTY

Mailing Address 500 NEWPORT CENTER DRIVE
SUITE 910

City State Zip Code
NEWPORT BEACH CA 92660-7009

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13951124

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LEROY W. CLOW

Mailing Address 1225 370TH ST

City State Zip Code
SAINT VINCENT MN 56755-9583

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929461

Amount of Each Receipt this Period
80.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ANTHONY T. CLUFF

Mailing Address P.O. BOX 393

City State Zip Code
ALDIE VA 20105-0393

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13945946

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 2180.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM K. CLUPPER

Mailing Address 5746 RIDGE RD

City State Zip Code
CORTLAND OH 44410-9711

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931710

Amount of Each Receipt this Period
30.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAMES F. CLYDE

Mailing Address 2778 S. OCEAN BLVD.
APARTMENT 201N

City State Zip Code
PALM BEACH FL 33480-6222

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 403.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934288

Amount of Each Receipt this Period
101.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. PETER A. COAKLEY

Mailing Address 20 EASTERN POINT BLVD

City State Zip Code
GLOUCESTER MA 01930-4405

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED DENTIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2101.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940841

Amount of Each Receipt this Period
300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **431.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. GAIL COBB

Mailing Address 7518 CAREW ST

City HOUSTON State TX Zip Code 77074-4218

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13945465
 Amount of Each Receipt this Period: 40.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MATTHEW COBB

Mailing Address P.O. BOX 477

City FORT SMITH State AR Zip Code 72902-0477

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13948225
 Amount of Each Receipt this Period: 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RHODA W. COBB

Mailing Address 336 E COCONUT PALM RD.

City BOCA RATON State FL Zip Code 33432-7916

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 403.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13936895
 Amount of Each Receipt this Period: 200.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 740.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 398 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
RHODA W. COBB

Mailing Address 336 E COCONUT PALM RD.

City State Zip Code
BOCA RATON FL 33432-7916

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 403.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937395

Amount of Each Receipt this Period
2.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
EDWIN B. COCHRANE

Mailing Address P.O. BOX 2819

City State Zip Code
MESILLA PARK NM 88047-2819

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935485

Amount of Each Receipt this Period
150.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GEORGE COCHRANE

Mailing Address P.O. BOX 191

City State Zip Code
SOUTHPORT ME 04576-0191

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 451.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958289

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **352.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 399 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JOHN R. COCHRAN

Mailing Address 4031 KENNETT PIKE APT 139

City State Zip Code
WILMINGTON DE 19807-2041

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13953909

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ANTHONY CODELLA

Mailing Address 116 WHITE PLAINS AVE.

City State Zip Code
WHITE PLAINS NY 10604-2800

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	6	/	2	0	1	0

Transaction ID: SA11.13957173

Amount of Each Receipt this Period
35.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CPT. JOHN CODISPOTI

Mailing Address 250 MATTHEWS COVE DR

City State Zip Code
MONTROSS VA 22520-3530

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	4	/	2	0	1	0

Transaction ID: SA11.13965735

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **310.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 400 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. RAYMOND C. COFER

Mailing Address 8520 CALIMAR DR

City State Zip Code
FRISCO TX 75034-7712

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931531

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. CARL G. COFF

Mailing Address 2101 S GARFIELD AVE APT 217

City State Zip Code
LOVELAND CO 80537-7300

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934364

Amount of Each Receipt this Period

30.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. CARL G. COFF

Mailing Address 2101 S GARFIELD AVE APT 217

City State Zip Code
LOVELAND CO 80537-7300

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959438

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

130.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 401 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES RICHARD COFFEE

Mailing Address **5724 HAGEN COURT**

City **DALLAS** State **TX** Zip Code **75252-4971**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1310.00**

Date of Receipt **10 / 22 / 2010**
Transaction ID: SA11.13949779
 Amount of Each Receipt this Period **150.00**
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RICHARD COFFEY

Mailing Address **3570 LARKSPUR DR.**

City **LONGMONT** State **CO** Zip Code **80503-7532**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **430.00**

Date of Receipt **10 / 18 / 2010**
Transaction ID: SA11.13937415
 Amount of Each Receipt this Period **110.00**
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. GLENA COFFING

Mailing Address **4320 OLLEY LANE**

City **FAIRFAX** State **VA** Zip Code **22032-1842**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt **10 / 18 / 2010**
Transaction ID: SA11.13933496
 Amount of Each Receipt this Period **1.00**
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **261.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 402 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. GLENA COFFING

Mailing Address 4320 OLLEY LANE

City State Zip Code
FAIRFAX VA 22032-1842

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936143

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT PARKER COFFIN

Mailing Address 916 BARCLAY CIR

City State Zip Code
LAKE FOREST IL 60045-4210

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED ARCHITECT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935540

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ROBERT P. COFIN

Mailing Address 916 BARCLAY CIR

City State Zip Code
LAKE FOREST IL 60045-4210

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944356

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 400.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 403 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
ROBERT P. COFIN

Mailing Address 916 BARCLAY CIR

City State Zip Code
LAKE FOREST IL 60045-4210

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 17 / 2010

Transaction ID: SA11.13969880

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. BERNARD COHEN

Mailing Address 3601 CARIBETH DR

City State Zip Code
ENCINO CA 91436-4229

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
RETIRED

Aggregate Year-to-Date ▼
271.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 25 / 2010

Transaction ID: SA11.13952378

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DR. JOEL COHEN, M.D.

Mailing Address 4826 BRAES VALLEY

City State Zip Code
HOUSTON TX 77096-1718

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
PHYSICIAN

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 28 / 2010

Transaction ID: SA11.13958243

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5150.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 404 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. PHILIP H. COHEN

Mailing Address 1500 OCEAN DR APT 903
APARTMENT 903

City State Zip Code
MIAMI BEACH FL 33139-3133

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943516

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. KATHRYN S. COLACHIS

Mailing Address 1001 GENTER ST.
PH. 9

City State Zip Code
LA JOLLA CA 92037-5539

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942937

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOSEPH COLARUOTOLO

Mailing Address 2741 TIMBER CREST LN.

City State Zip Code
LEWISVILLE TX 75077-8672

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948498

Amount of Each Receipt this Period
101.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 2151.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 405 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JERRY COLE

Mailing Address 10401 S 750 E

City State Zip Code
WALKERTON IN 46574-9474

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1255.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 26 / 2010

Transaction ID: SA11.13951417

Amount of Each Receipt this Period
605.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LEE COLE

Mailing Address 8361 N LEE TREVINO DR

City State Zip Code
TUCSON AZ 85742-9788

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
276.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 18 / 2010

Transaction ID: SA11.13935497

Amount of Each Receipt this Period
26.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. MARY A. COLE

Mailing Address 13640 PASEO DEL ROBLE CT

City State Zip Code
LOS ALTOS HILLS CA 94022-2431

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1080.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 25 / 2010

Transaction ID: SA11.13954800

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **731.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 406 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. RALSTON P. COLE

Mailing Address 1040 METAIRIE RD.

City State Zip Code
METAIRIE LA 70005-4013

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EMDSI PRESIDENT OF CO.

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 501.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932675

Amount of Each Receipt this Period

301.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
JACQUELINE D. COLE-GRAZIANO

Mailing Address 1008 HAMMOCK PINE BLVD

City State Zip Code
CLEARWATER FL 33761-4231

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13969289

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. J. TOM COLEMAN, JR.

Mailing Address P.O. BOX 22398

City State Zip Code
SAVANNAH GA 31403-2398

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BONITZ PRESIDENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13972898

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1351.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 407 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WILLIE R. COLEMAN

Mailing Address 606 E GARFIELD AVENUE

City State Zip Code
MORTON TX 79346-4107

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED FARMER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 19 / 2010

Transaction ID: SA11.13972041

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAVID RUSSELL COLES

Mailing Address 2424 S STEWART ST.

City State Zip Code
MESA AZ 85202-7565

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TCH, INC. OWNER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 265.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 21 / 2010

Transaction ID: SA11.13942947

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CHRISTOPHER NMN COLLINS

Mailing Address 1501 RUTLEDGE AVE

City State Zip Code
CHARLOTTESVILLE VA 22903-1417

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED REAL ESTATE BROOKER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 340.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 18 / 2010

Transaction ID: SA11.13936848

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 250.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 408 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JAMES COLLIGAN

Mailing Address 474 TACONIC RD.

City State Zip Code
GREENWICH CT 06831-2851

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
11 / 20 / 2010

Transaction ID: SA11.13971549

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PATRICK F. COLLINS

Mailing Address 500 NEWPORT CENTER DRIVE
SUITE 910

City State Zip Code
NEWPORT BEACH CA 92660-7009

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS CPA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13951126

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ROBERT M. COLLINS

Mailing Address 1642 MONTANE DR. E

City State Zip Code
GOLDEN CO 80401-8092

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13963520

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 2550.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 409 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
VIVIAN H. COLLINS

Mailing Address 4701 MONTEREY OAKS BLVD APT 71

City State Zip Code
AUSTIN TX 78749-1073

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945516

Amount of Each Receipt this Period
70.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. KIMBERLY M. COLONNETTA

Mailing Address 5435 PARK LN.

City State Zip Code
DALLAS TX 75220-2149

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13948204

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GLENN COLVILLE

Mailing Address 5906 MASTERS DRIVE

City State Zip Code
HOUSTON TX 77069-1318

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED CERTIFIED PUBLIC ACCOUNTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934194

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **5170.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 410 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GLENN COLVILLE

Mailing Address 5906 MASTERS DRIVE

City HOUSTON State TX Zip Code 77069-1318

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation CERTIFIED PUBLIC ACCOUNTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13935803
 Amount of Each Receipt this Period: 100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GLENN COLVILLE

Mailing Address 5906 MASTERS DRIVE

City HOUSTON State TX Zip Code 77069-1318

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation CERTIFIED PUBLIC ACCOUNTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 11 / 18 / 2010
Transaction ID: SA11.13971364
 Amount of Each Receipt this Period: 100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. MARY K. COLWELL

Mailing Address 140 MARICOPA CIR

City ENON State OH Zip Code 45323-1817

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 256.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13949967
 Amount of Each Receipt this Period: 40.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 240.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 411 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. MARY K. COLWELL

Mailing Address 140 MARICOPA CIR

City ENON State OH Zip Code 45323-1817

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 256.00

Date of Receipt 11 / 16 / 2010
Transaction ID: SA11.13969158
Amount of Each Receipt this Period 25.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CAROLYN R. COMATAS

Mailing Address 5061 AVALON DR.

City ALPHARETTA State GA Zip Code 30005-4453

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 211.00

Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13939339
Amount of Each Receipt this Period 20.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CLYDE B. COMBS

Mailing Address P.O. BOX 23

City RAWLINGS State MD Zip Code 21557-0023

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13950331
Amount of Each Receipt this Period 15.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 60.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 412 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROGER E. COMLEY

Mailing Address **141 SETON HILL RD.**

City **WILLIAMSBURG** State **VA** Zip Code **23188-1579**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **305.00**

Date of Receipt **10 / 22 / 2010**
Transaction ID: SA11.13950581
 Amount of Each Receipt this Period **100.00**
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RITA COMPTON

Mailing Address **14910 W CARIBBEAN LN.**

City **SURPRISE** State **AZ** Zip Code **85379-6139**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RELIABLE ONSITE SUBSTANCE TESTING** Occupation **DRUG TESTER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **201.00**

Date of Receipt **10 / 19 / 2010**
Transaction ID: SA11.13938876
 Amount of Each Receipt this Period **1.00**
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HARVEY B. COMRIE

Mailing Address **4185 FOREST PARK RD**

City **MUSKEGON** State **MI** Zip Code **49441-4554**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **DENTIST**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt **10 / 25 / 2010**
Transaction ID: SA11.13948161
 Amount of Each Receipt this Period **250.00**
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **351.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 413 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. DOUGLAS F. CONDON		Date of Receipt
	Mailing Address 6309 BURNHAM CIR APT 103		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 10 / 19 / 2010
	City	State	Zip Code
	INVER GROVE	MN	55076-1633
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13938989
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 216.00	<input type="text"/> 1.00
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) HOBERT CONGER		Date of Receipt
	Mailing Address 414 E 4TH. ST.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 10 / 19 / 2010
	City	State	Zip Code
	METROPOLIS	IL	62960-2107
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13940359
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00	<input type="text"/> 40.00
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) HOBERT CONGER		Date of Receipt
	Mailing Address 414 E 4TH. ST.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 10 / 21 / 2010
	City	State	Zip Code
	METROPOLIS	IL	62960-2107
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13946661
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00	<input type="text"/> 50.00
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 91.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 414 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) HOBERT CONGER	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 9 / 2 0 1 0
	Mailing Address 414 E 4TH. ST.	Transaction ID: SA11.13961750
	City State Zip Code METROPOLIS IL 62960-2107	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

B.	Full Name (Last, First, Middle Initial) MS. MARY T. CONLAN	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 1 0
	Mailing Address 497 EATON WAY	Transaction ID: SA11.13943647
	City State Zip Code WEST CHESTER PA 19380-6936	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 331.00	

C.	Full Name (Last, First, Middle Initial) DOLORES CONLEY	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	Mailing Address 1591 HOLLY HILL DR.	Transaction ID: SA11.13952100
	City State Zip Code BETHEL PARK PA 15102-3507	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 530.00	

SUBTOTAL of Receipts This Page (optional)	▶	180.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 415 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOHN CONNAUGHTON

Mailing Address 111 HUNTINGTON AVENUE

City State Zip Code
BOSTON MA 02199-7610

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BAIN CAPITAL MANAGING DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13951063

Amount of Each Receipt this Period
30400.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LENA MAE CONNER

Mailing Address P.O. BOX 164

City State Zip Code
HAYES LA 70646-0164

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 411.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963554

Amount of Each Receipt this Period
51.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LENA MAE CONNER

Mailing Address P.O. BOX 164

City State Zip Code
HAYES LA 70646-0164

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 411.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963940

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 30501.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 416 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. MARY NELL CONNELL

Mailing Address 105 HEATHERWOOD CV.

City JACKSON State TN Zip Code 38305-8846

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 386.00

Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13948375
Amount of Each Receipt this Period 1.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT H. CONNER

Mailing Address 800 BEAR CREEK RD

City CURTIN State OR Zip Code 97424-8409

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 28 / 2010
Transaction ID: SA11.13960262
Amount of Each Receipt this Period 75.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM H. CONNER, JR.

Mailing Address 12 CHARLESTON CT

City ELGIN State SC Zip Code 29045-8521

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 21 / 2010
Transaction ID: SA11.13946155
Amount of Each Receipt this Period 100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 176.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 417 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. LINDA L. CONNOLLY

Mailing Address 206 WILD PINE CT.

City State Zip Code
KALISPELL MT 59901-6876

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 451.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941739

Amount of Each Receipt this Period
51.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
TIMOTHY CONNOLLY

Mailing Address 2049 ORCHARD PARK DR.

City State Zip Code
SCHENECTADY NY 12309-2207

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
G E ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13945922

Amount of Each Receipt this Period
75.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CARY CONOVER

Mailing Address 604 SOUTH CHESTNUT STREET

City State Zip Code
TREMONT IL 61568-8578

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LAWSON SOFTWARE PRINCIPAL SYSTEMS CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 410.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13947834

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 226.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 418 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
ADRIENE CONRAD

Mailing Address 7 KIMLIN COURT

City State Zip Code
POUGHKEEPSIE NY 12603-4735

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NORTH RIVER ABSTRACT CORP- ORATI OWNER OF TITLE INSURANCE AGENC

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962515

Amount of Each Receipt this Period
225.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. BEN D. CONRADY

Mailing Address 5 CANTERBURY LN.

City State Zip Code
LINCOLN IL 62656-5443

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FARM OPERATION PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930313

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. BERNICE M. CONRAD

Mailing Address 101 RIDGEWAY DR

City State Zip Code
BRIDGEPORT WV 26330-1149

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 381.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957158

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **465.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 419 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. BERNICE M. CONRAD

Mailing Address 101 RIDGEWAY DR

City	State	Zip Code
BRIDGEPORT	WV	26330-1149

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER	Occupation HOMEMAKER
-------------------------------	-------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 381.00
---	------------------------------------

Date of Receipt

MM / DD / YYYY
11 / 02 / 2010

Transaction ID: SA11.13964756

Amount of Each Receipt this Period

15.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. MARJORIE E. CONRAD

Mailing Address P.O. BOX 2170

City	State	Zip Code
YORK BEACH	ME	03910-2170

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00
---	------------------------------------

Date of Receipt

MM / DD / YYYY
10 / 28 / 2010

Transaction ID: SA11.13960271

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. KATHERINE E. CONSTABLE

Mailing Address 2133 RICHMOND RD

City	State	Zip Code
TROY	VA	22974-3730

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00
---	------------------------------------

Date of Receipt

MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13942555

Amount of Each Receipt this Period

30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

70.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 420 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. PHILLIP J. CONWAY

Mailing Address 2121 BALSAM CT SW

City ROCHESTER State MN Zip Code 55902-1136

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 11 / 08 / 2010
Transaction ID: SA11.13966770
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ARTHUR R. COOK

Mailing Address 3313 RESTON DR

City THE VILLAGES State FL Zip Code 32162-7688

FEC ID number of contributing federal political committee. **C**

Name of Employer ARCERT, INC
Occupation SELF-EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 960.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13928848
Amount of Each Receipt this Period: 400.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BETTY COOK

Mailing Address 3235 BETSY LN.

City HERNDON State VA Zip Code 20171-1615

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA11.13928055
Amount of Each Receipt this Period: 110.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 610.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 421 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DONALD D. COOK

Mailing Address **3354 135TH. ST.**

City **LAMONT** State **IA** Zip Code **50650-9742**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **FARMER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt **11 / 08 / 2010**

Transaction ID: SA11.13966815

Amount of Each Receipt this Period **150.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ETHAN COOK

Mailing Address **1330 W FARGO AVE**

City **CHICAGO** State **IL** Zip Code **60626-5915**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ABM CORPORATION (WILLIS TOWER)** Occupation **SECURITY OFFICER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **10 / 20 / 2010**

Transaction ID: SA11.13943191

Amount of Each Receipt this Period **15.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ETHAN COOK

Mailing Address **1330 W FARGO AVE**

City **CHICAGO** State **IL** Zip Code **60626-5915**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ABM CORPORATION (WILLIS TOWER)** Occupation **SECURITY OFFICER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **10 / 21 / 2010**

Transaction ID: SA11.13946384

Amount of Each Receipt this Period **15.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **180.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 422 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES D. COOK

Mailing Address 150 BONANZA DR.

City State Zip Code
SHEPHERD TX 77371-6010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13946376

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. SHIRLEY H. COOK

Mailing Address 585 HILLTOP DR

City State Zip Code
CHULA VISTA CA 91910-6138

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13929662

Amount of Each Receipt this Period
35.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. THOMAS A. COOK, JR.

Mailing Address 4591 SANDERLING CIRCLE W.

City State Zip Code
BOYNTON BEACH FL 33436-5145

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED INSURANCE BROKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13940206

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 485.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 423 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. THOMAS G. COOK

Mailing Address 810 STONEBRIDGE LN

City State Zip Code
CRYSTAL LAKE IL 60014-1821

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937317

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
WILLIAM COOK

Mailing Address 333 RIVER ST

City State Zip Code
LOUISVILLE KY 40202-1126

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PRISMA CAPITAL PARTNERS INVESTMENT ADVISOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 324.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 1 0

Transaction ID: SA11.13928745

Amount of Each Receipt this Period

324.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. LESTER COOLEY

Mailing Address 2150 WILMER RD.

City State Zip Code
WILMER AL 36587-8232

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
COOLEY CONSTRUCTION CO, INC. OWNER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13968556

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

674.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 424 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
CHARLES HENRY COOLIDGE, JR.

Mailing Address 6276 KINGFISHER LN.

City State Zip Code
ALEXANDRIA VA 22312-3913

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EADS-NA BUSINESS DEVELOPMENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13929852

Amount of Each Receipt this Period

125.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. MICHAEL COONEY

Mailing Address 401 9TH STREET N.W.
SUITE 900

City State Zip Code
WASHINGTON DC 20004-2145

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NIXON PEADBODY ATTORNEY

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 811.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 0 / 2 0 1 0

Transaction ID: SA11.13968700

Amount of Each Receipt this Period

811.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. CHARLIE W. COOPER

Mailing Address 6140 SHADY GROVE LN

City State Zip Code
MEMPHIS TN 38120-3112

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941288

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1086.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 425 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. EDWIN L. COOPER

Mailing Address 7700 SEAWALL BLVD.
APARTMENT 203

City State Zip Code
GALVESTON TX 77551-3401

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
COBRA CONSULTING, INC. BUSINESS MANAGER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13969142

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. EDWIN L. COOPER

Mailing Address 7700 SEAWALL BLVD.
APARTMENT 203

City State Zip Code
GALVESTON TX 77551-3401

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
COBRA CONSULTING, INC. BUSINESS MANAGER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 7 / 2 0 1 0

Transaction ID: SA11.13969890

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. GAIL F. COOPER

Mailing Address 4956 EXETER DR.

City State Zip Code
SUFFOLK VA 23434-7099

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LANDSCAPE MGMT OWNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1360.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934167

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 426 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. GAIL F. COOPER

Mailing Address 4956 EXETER DR.

City State Zip Code
SUFFOLK VA 23434-7099

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LANDSCAPE MGMT OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1360.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2010

Transaction ID: SA11.13955997

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GEORGE COOPER

Mailing Address 7491 WESLEYAN CHURCH ROAD SW

City State Zip Code
PATASKALA OH 43062-8570

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13963462

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. MARTHA C. COOPER

Mailing Address 3131 US 62 SW

City State Zip Code
WASHINGTON C H OH 43160

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
OHIO STATE UNIVERSITY PROFESSOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
MM / DD / YYYY
11 / 03 / 2010

Transaction ID: SA11.13965145

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 290.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 427 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. ROSELLA M. COOPER

Mailing Address 257 E 4TH. AVE

City State Zip Code
SPRINGFIELD CO 81073-1104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939739

Amount of Each Receipt this Period
10.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM R. COOPER

Mailing Address 8214 WESTCHESTER DRIVE
9TH FLOOR

City State Zip Code
DALLAS TX 75225-6100

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13942469

Amount of Each Receipt this Period
15000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PAUL C. COPPOCK

Mailing Address 2203 W COVENTRY LN

City State Zip Code
ENOLA PA 17025-1279

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946471

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 15210.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 428 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. PATRICK J. COPPS

Mailing Address 11926 N WILDERNESS CT

City State Zip Code
MEQUON WI 53092-2984

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
COPPS INDUSTRIES INC MANAGER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 1 0

Transaction ID: SA11.13972097

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. RICHARD A. CORADESCHI

Mailing Address 32 MITCHELL RD

City State Zip Code
HACKETTSTOWN NJ 07840-2541

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 295.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918786

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. SCOTT CORBITT

Mailing Address 2709 YAGGI DR

City State Zip Code
FLOWER MOUND TX 75028-3650

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
VERIZON WIRELESS DIRECTOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929442

Amount of Each Receipt this Period

75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 429 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. PATRICK J. CORCORAN

Mailing Address 19866 CALLE LAGO

City State Zip Code
WALNUT CA 91789-1709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13971349

Amount of Each Receipt this Period
30.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BRUCE COREY

Mailing Address 11010 N 77TH ST

City State Zip Code
SCOTTSDALE AZ 85260-5564

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939015

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
H COREY

Mailing Address 80 HEREFORD RD

City State Zip Code
BRONXVILLE NY 10708-5417

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949595

Amount of Each Receipt this Period
120.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **350.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 430 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JOSEPH CORINO, JR.

Mailing Address 317 HONEYHILL COURT

City State Zip Code
NASHVILLE TN 37217-3127

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 311.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952323

Amount of Each Receipt this Period

31.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. DON LEE CORLEY

Mailing Address 401 JIM WRIGHT FWY S STE 110

City State Zip Code
WHITE SETTLEMENT TX 76108-2681

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SALES

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13932150

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. MERV K. CORRELL

Mailing Address 209 W. UNIVERSITY AVENUE

City State Zip Code
CHAMPAIGN IL 61820

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED FINANCIAL SERVICES

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930373

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

181.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 431 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DAN CORRIGAN

Mailing Address 525 IRIS LN.

City State Zip Code
VERO BEACH FL 32963-1806

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
PALADIN PROTECTIVE SYSTEMS INC.

Occupation INFORMATION REQUESTED PER BEST EFFORTS
PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13953198

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CALVIN P. CORSI

Mailing Address 6808 DORA BLVD

City State Zip Code
CLEVELAND OH 44131-4945

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
PALADIN PROTECTIVE SYSTEMS INC.

Occupation INFORMATION REQUESTED PER BEST EFFORTS
PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	2	/	2	0	1	0

Transaction ID: SA11.13962687

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOE CORVINO

Mailing Address 96 EL BONITO WAY

City State Zip Code
MILLBRAE CA 94030-2246

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
RETIRED

Occupation INFORMATION REQUESTED PER BEST EFFORTS
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	4	/	2	0	1	0

Transaction ID: SA11.13965179

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 400.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 432 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JOHN D. CORWIN

Mailing Address 133 21ST AVE N

City State Zip Code
TEXAS CITY TX 77590-6008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
MM / DD / YYYY
10 / 20 / 2010

Transaction ID: SA11.13944622

Amount of Each Receipt this Period
400.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. RAYMOND COSENTINO

Mailing Address 15321 VASSAR ST

City State Zip Code
WESTMINSTER CA 92683-6133

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 376.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13933356

Amount of Each Receipt this Period
201.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. DONELDA COSTELLO

Mailing Address 23329 20 MILE RD.

City State Zip Code
PARIS MI 49338-9404

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 555.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13948758

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **626.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 433 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MISS LINDA M. COSTELLO	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 1 0
	Mailing Address 7585 BEVERLY LN	Transaction ID: SA11.13957442
	City State Zip Code GATES MILLS OH 44040-9681	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

B.	Full Name (Last, First, Middle Initial) MS. JANET R. COSTIN	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 9 / 2 0 1 0
	Mailing Address 1519 W WOODSIDE DR	Transaction ID: SA11.13977515A
	City State Zip Code DUNLAP IL 61525-9512	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer CATERPILLAR, INC.	Occupation HR PROFESSIONAL SUPPORTING COMPUTER SY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	CHARGED BACK \$400.00 ON 11/19/2010

C.	Full Name (Last, First, Middle Initial) MS. JANET R. COSTIN	Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 9 / 2 0 1 0
	Mailing Address 1519 W WOODSIDE DR	Transaction ID: SA11.13977515B
	City State Zip Code DUNLAP IL 61525-9512	Amount of Each Receipt this Period -400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer CATERPILLAR, INC.	Occupation HR PROFESSIONAL SUPPORTING COMPUTER SY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	CHARGED BACK

SUBTOTAL of Receipts This Page (optional)	▶	100.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 434 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. MARY T. COSTICH

Mailing Address 443 SAVAGE FARM DR.

City ITHACA State NY Zip Code 14850-6507

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 10 / 29 / 2010
Transaction ID: SA11.13961698
 Amount of Each Receipt this Period: 150.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
FREDERICK COTTRELL

Mailing Address 604 WYNYARD ROAD

City WILMINGTON State DE Zip Code 19803-2231

FEC ID number of contributing federal political committee. **C**

Name of Employer RICHARDS LAYTON FINGER Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13954343
 Amount of Each Receipt this Period: 250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. NATHAN PIERCE COUCH

Mailing Address 5 HIGH ROCK RD.

City DOVER State MA Zip Code 02030-1629

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13953647
 Amount of Each Receipt this Period: 100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 500.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 435 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. THOMAS W. COUGHLIN

Mailing Address 907 LAGRANGE AVENUE

City State Zip Code
CAMBRIDGE MD 21613-2008

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13936983

Amount of Each Receipt this Period: 150.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. CAROLYN L. COUGNET

Mailing Address 2605 ORCHARD AVE

City State Zip Code
ELLICOTT CITY MD 21043-1927

FEC ID number of contributing federal political committee. **C**

Name of Employer HARBOR HOSPITAL Occupation NURSE/RN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt: MM / DD / YYYY
11 / 19 / 2010

Transaction ID: SA11.13970041

Amount of Each Receipt this Period: 45.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MARY COUK

Mailing Address 731 PLAZA DR.

City State Zip Code
JOPLIN MO 64804-3961

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: MM / DD / YYYY
10 / 20 / 2010

Transaction ID: SA11.13943501

Amount of Each Receipt this Period: 150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 345.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	PAGE 436 / 3187
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. ROBERT J. COULTER	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 4551 PINK HEATHER TRL	Transaction ID: SA11.13944712
	City State Zip Code CHATTANOOGA TN 37415-2091	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

B.	Full Name (Last, First, Middle Initial) STEVEN E. COUNCE	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 5528 SCOUT CREEK DR	Transaction ID: SA11.13932682
	City State Zip Code BIRMINGHAM AL 35244-3945	Amount of Each Receipt this Period 151.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 331.00	

C.	Full Name (Last, First, Middle Initial) MR. RONALD W. COUNTS	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 6837 OAK VALLEY DR	Transaction ID: SA11.13931343
	City State Zip Code COLORADO SPRINGS CO 80919-3404	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 680.00	

SUBTOTAL of Receipts This Page (optional)	551.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 437 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JAMES W. COURRIER, SR.

Mailing Address 606 CARSKADON ROAD

City State Zip Code
KEYSER WV 26726-2807

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DR. COURRIER DENTIST GENERAL DENTISTRY

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 285.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13960234

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
RICHARD COUSSONS

Mailing Address 6700 W DORADO DR UNIT 19

City State Zip Code
DENVER CO 80123-5174

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13932265

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
ROBERT C. COWN

Mailing Address 2756 INDIAN SPRINGS RD

City State Zip Code
MARIANNA FL 32446-6889

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 626.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933065

Amount of Each Receipt this Period

376.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

736.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 438 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CASEY COX	Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 1 0
	Mailing Address 2840 LA CONCHA DR	Transaction ID: SA11.13939704
	City State Zip Code CLEARWATER FL 33762-2203	Amount of Each Receipt this Period 51.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Aggregate Year-to-Date ▼ 211.00	

B.	Full Name (Last, First, Middle Initial) MR. CHARLES R. COX	Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	Mailing Address 8785 W ORCHID ISLAND CIR APARTMENT 206	Transaction ID: SA11.13952809
	City State Zip Code VERO BEACH FL 32963-9550	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Aggregate Year-to-Date ▼ 390.00	

C.	Full Name (Last, First, Middle Initial) MR. KEITH W. COX	Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 1 0
	Mailing Address 3616 BREAKERS DR.	Transaction ID: SA11.13932053
	City State Zip Code OLYMPIA FLDS IL 60461-1174	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Aggregate Year-to-Date ▼ 235.00	

SUBTOTAL of Receipts This Page (optional)	▶	126.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 439 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. KEITH W. COX
 Mailing Address 3616 BREAKERS DR.
 City State Zip Code
OLYMPIA FLDS IL 60461-1174
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
RETIRED RETIRED
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 235.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 1 9 / 2 0 1 0
Transaction ID: SA11.13971042
 Amount of Each Receipt this Period
 25.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT W. COX
 Mailing Address 10909 MOUNT BONNEL CT
 City State Zip Code
FORT WORTH TX 76108-4747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
RETIRED RETIRED
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 351.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 9 / 2 0 1 0
Transaction ID: SA11.13941625
 Amount of Each Receipt this Period
 151.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HARMON COXTON
 Mailing Address 1609 GEORGE WASHINGTON MEM HW
 City State Zip Code
YORKTOWN VA 23693-4310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
COXTON GOLD TEAM MANAGER
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 8 / 2 0 1 0
Transaction ID: SA11.13935649
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 376.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 440 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. GLEN E. CRAFT	Date of Receipt MM / DD / YYYY 10 / 29 / 2010
	Mailing Address 1108 N 6TH ST	Transaction ID: SA11.13961811
	City State Zip Code TONKAWA OK 74653-1532	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

B.	Full Name (Last, First, Middle Initial) MR. JOSEPH CRAFT	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 3610 S TERWILLEGER BLVD	Transaction ID: SA11.13945616
	City State Zip Code TULSA OK 74105-3434	Amount of Each Receipt this Period 10000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer ALLIANCE COAL	Occupation VICE PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

C.	Full Name (Last, First, Middle Initial) SUSAN R. CRAIN	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 7182 CHAMPIONS LN.	Transaction ID: SA11.13947100
	City State Zip Code WEST CHESTER OH 45069-4634	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

SUBTOTAL of Receipts This Page (optional)	10110.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 441 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. CHARLES L. CRAMER

Mailing Address P.O. BOX 907

City State Zip Code
PLYMOUTH IN 46563-0907

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 345.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934722

Amount of Each Receipt this Period

60.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JIM F. CRAMER

Mailing Address 2817 S. LIPSCOMB

City State Zip Code
AMARILLO TX 79109-3531

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DATA FLOW, INC. PRESIDENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928522

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JIM F. CRAMER

Mailing Address 2817 S. LIPSCOMB

City State Zip Code
AMARILLO TX 79109-3531

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DATA FLOW, INC. PRESIDENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13969816

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

260.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 442 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
JOHN SCOTT CRAMER

Mailing Address 1244 ARBOR RD APT 454

City State Zip Code
WINSTON SALEM NC 27104-1141

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946524

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. BARBARA CRANE

Mailing Address 3 FRANKLIN AVE

City State Zip Code
CLINTON NY 13323-1615

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13971627

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. BOBBYE B. CRANE

Mailing Address 3344 FOREST LN.
APT 112

City State Zip Code
DALLAS TX 75234-7046

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944475

Amount of Each Receipt this Period

20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

570.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 443 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. DOLORES R. CRANE

Mailing Address 8 GREAT OAKS RD

City State Zip Code
NEW HOPE PA 18938-1108

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13928821

Amount of Each Receipt this Period
210.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PHILIP A. CRANE, JR.

Mailing Address 3422 OCEAN FRONT WALK

City State Zip Code
SAN DIEGO CA 92109-7531

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13953042

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. SUE CRAVEN-SMITH

Mailing Address 8625 CARTER GROVE WAY

City State Zip Code
KNOXVILLE TN 37923-6838

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
211.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	1	0

Transaction ID: SA11.13943116

Amount of Each Receipt this Period
15.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **325.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 444 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. SUE CRAVEN-SMITH

Mailing Address 8625 CARTER GROVE WAY

City State Zip Code
KNOXVILLE TN 37923-6838

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 211.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950466

Amount of Each Receipt this Period

20.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. THEODORE F. CRAVER

Mailing Address 6 INDIAN HILL LANE

City State Zip Code
HILTON HEAD ISLAND SC 29926-1259

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939602

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. BARRY D. CRAWFORD

Mailing Address 2801 ANNAKAY XING

City State Zip Code
MIDLOTHIAN VA 23113-1404

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936864

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

420.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 445 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CHARLES C. CRAWFORD

Mailing Address 1220 WINDING BRANCH CIR

City State Zip Code
DUNWOODY GA 30338-3936

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GTRT GTRI

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954948

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. ILA MARGARET CRAWFORD

Mailing Address 3554 GRANDVIEW

City State Zip Code
SAN ANGELO TX 76904-8152

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956057

Amount of Each Receipt this Period
30.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. ILA MARGARET CRAWFORD

Mailing Address 3554 GRANDVIEW

City State Zip Code
SAN ANGELO TX 76904-8152

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956059

Amount of Each Receipt this Period
30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 85.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 446 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JASON CRAWFORD

Mailing Address 60 GARVIN AVE

City State Zip Code
MANCHESTER NH 03109-5518

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929390

Amount of Each Receipt this Period

35.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. PATRICIA CRAWFORD

Mailing Address 356 TOPAZ ST.

City State Zip Code
REDWOOD CITY CA 94062-2934

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 632.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13931345

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. PATRICIA CRAWFORD

Mailing Address 356 TOPAZ ST.

City State Zip Code
REDWOOD CITY CA 94062-2934

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 632.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932783

Amount of Each Receipt this Period

2.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

87.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 447 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. PATRICIA CRAWFORD

Mailing Address 356 TOPAZ ST.

City State Zip Code
REDWOOD CITY CA 94062-2934

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 632.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13960228

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT H. CRAWFORD

Mailing Address 10615 MAPLEGROVE LN

City State Zip Code
DALLAS TX 75218-2310

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930594

Amount of Each Receipt this Period
101.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT H. CRAWFORD

Mailing Address 1253 SUTHERLAND CT

City State Zip Code
DUNEDIN FL 34698-8355

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936663

Amount of Each Receipt this Period
1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 202.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 448 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT H. CRAWFORD

Mailing Address 1253 SUTHERLAND CT

City State Zip Code
DUNEDIN FL 34698-8355

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 241.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953735

Amount of Each Receipt this Period
20.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RONALD M. CRAWFORD

Mailing Address 1106 DUNAWAY DRIVE

City State Zip Code
MCLEAN VA 22101-2206

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961230

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
TOM CRAWFORD

Mailing Address 325 7TH ST. NW SUITE 400

City State Zip Code
WASHINGRTON DC 20004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
C2 GROUP LLC PARTNER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11A.13977526

Amount of Each Receipt this Period
250.00

IN-KIND CONTRIBUTION

IN-KIND: FOOD AND BEVERAGE

SUBTOTAL of Receipts This Page (optional) ► 1270.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 449 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. NED CRAWLEY	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 4115 MEDFORD DR APT30	Transaction ID: SA11.13951607
	City ANNANDALE State VA Zip Code 22003-2778	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer US GOVT Occupation COMPUTER PROGRAMER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 360.00	

B.	Full Name (Last, First, Middle Initial) JOHN CREGER	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 617 N WALNUT ST.	Transaction ID: SA11.13933115
	City DILLON State MT Zip Code 59725-2979	Amount of Each Receipt this Period 101.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 301.00	

C.	Full Name (Last, First, Middle Initial) MR. GERHARD CREMER	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 3406 RUSHING RD.	Transaction ID: SA11.13953425
	City AUGUSTA State GA Zip Code 30906-4827	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 401.00	

SUBTOTAL of Receipts This Page (optional)	351.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 450 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DR. GEORGE CRESSWELL	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 2135 SOUTHGATE RD	Transaction ID: SA11.13942547
	City State Zip Code COLORADO SPRINGS CO 80906-2605	Amount of Each Receipt this Period 750.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer SELF-EMPLOYED Occupation PHYSICIAN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 750.00	

B.	Full Name (Last, First, Middle Initial) DR. GEORGE CRESSWELL	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 2135 SOUTHGATE RD	Transaction ID: SA11.13955949
	City State Zip Code COLORADO SPRINGS CO 80906-2605	Amount of Each Receipt this Period -750.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer SELF-EMPLOYED Occupation PHYSICIAN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 750.00	CHARGED BACK

C.	Full Name (Last, First, Middle Initial) ELIZABETH CREW	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 6422 CRAFFORD AVE	Transaction ID: SA11.13932803
	City State Zip Code NORFOLK VA 23518-5221	Amount of Each Receipt this Period 26.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 226.00	CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	26.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 451 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
ELIZABETH CREW

Mailing Address 6422 CRAFFORD AVE

City State Zip Code
NORFOLK VA 23518-5221

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
226.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933816

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
ELIZABETH CREW

Mailing Address 6422 CRAFFORD AVE

City State Zip Code
NORFOLK VA 23518-5221

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
226.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952131

Amount of Each Receipt this Period

35.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. A. DRUMMOND CREWS

Mailing Address 8333 W 102ND STREET

City State Zip Code
OVERLAND PARK KS 66212-3421

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 8 / 2 0 1 0

Transaction ID: SA11.13966820

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

160.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 452 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. CHARLENE M. CRIDER

Mailing Address 201 DEER LICK PL

City PADUCAH State KY Zip Code 42001-6751

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939636

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
ROYAL CRIDER

Mailing Address 134 ARSENAULT XING

City KINGSTON State TN Zip Code 37763-7133

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929059

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. CLARA M. CRIMMINS

Mailing Address 17 PATTERSON LN

City MANALAPAN State NJ Zip Code 07726-2914

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
760.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945321

Amount of Each Receipt this Period
110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **260.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 453 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
CARMELO CRISAFULLI

Mailing Address 283 MURRAY AVE

City State Zip Code
DELMAR NY 12054-9708

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952108

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. BARBARA L. CRISLER

Mailing Address 5284 BARDWELL AVENUE

City State Zip Code
RIVERSIDE CA 92506-1517

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 280.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938480

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. DOROTHY J. CROZENZI

Mailing Address 2455 MUNSTER ROAD

City State Zip Code
ROCHESTER HILLS MI 48309-2321

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938724

Amount of Each Receipt this Period

65.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

365.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 454 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
CHARLES CROCHER

Mailing Address 1900 MARLAND ST

City State Zip Code
SPRINGFIELD IL 62702-2657

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935912

Amount of Each Receipt this Period
1.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAVID S. CROCKETT

Mailing Address 31088 BIG BEAR DR

City State Zip Code
EVERGREEN CO 80439-9679

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940929

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DONALD W. CROCKER

Mailing Address 14 CINCHRING ROAD

City State Zip Code
ROLLING HILLS CA 90274-5009

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13942467

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1101.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 455 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
SUZANNE M. CROFOOT

Mailing Address 22333 STATE RD. 4

City LAKEVILLE State IN Zip Code 46536-9760

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 335.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13942548
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. STAN CROFUT

Mailing Address 12141 MOFFITT ST SW

City MASSILLON State OH Zip Code 44647-7243

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13939757
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. VIRGINIA R. CRONE

Mailing Address 9032 W 650 N

City WILLIAMSPORT State IN Zip Code 47993-8035

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA11.13928019
Amount of Each Receipt this Period: 80.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 170.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 456 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. MICHAEL D. CRONIN

Mailing Address 9414 GRANVILLE PKWY

City State Zip Code
LA VISTA NE 68128-2991

FEC ID number of contributing federal political committee. **C**

Name of Employer
INTERSTATE BUSINESS EQUIP-
MENT INC

Occupation
PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	2	/	2	0	1	0

Transaction ID: SA11.13967713

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. ANN M. CRONKHITE

Mailing Address 1228 S. WALL STREET

City State Zip Code
SPOKANE WA 99204-3748

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
337.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	9	/	2	0	1	0

Transaction ID: SA11.13967461

Amount of Each Receipt this Period

5.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. BETTYE J. CROSS

Mailing Address 1172 SE 4TH. ST.

City State Zip Code
PRINEVILLE OR 97754-2258

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	1	0

Transaction ID: SA11.13958275

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

555.00

TOTAL This Period (last page this line number only) ►

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 457 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DENNIS CROSS

Mailing Address 25 EAST 86TH STREET

City State Zip Code
NEW YORK NY 10028-0553

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13962946

Amount of Each Receipt this Period
350.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. DONALD R. CROSS

Mailing Address 31927 SYLVAN ROAD

City State Zip Code
GOLDEN CO 80403-8572

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ED.FACILITY CONS. CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 202.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13941653

Amount of Each Receipt this Period
51.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. DANIEL L. CROTTY

Mailing Address 182 MONTCLAIR DRIVE

City State Zip Code
VENTURA CA 93003-1229

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
11 / 18 / 2010

Transaction ID: SA11.13971348

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **501.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 458 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ADEN H. CROUSE

Mailing Address 923 S. SHARON AVE.

City State Zip Code
RED LION PA 17356-9031

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937204

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. PENNY L. CROW

Mailing Address 308 SUTTONWOOD DR

City State Zip Code
FORT WORTH TX 76108-3842

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928910

Amount of Each Receipt this Period
160.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. YVONNE L. CROW

Mailing Address 1109 JANNAS TRL

City State Zip Code
EDMOND OK 73012-4309

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 626.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939032

Amount of Each Receipt this Period
76.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 276.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 459 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. FLOYD E. CROWDER	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address P.O. BOX 167 BARRISTER PLACE	Transaction ID: SA11.13945730
	City State Zip Code COLUMBIA IL 62236-0167	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation CROWDER & SCOGGINS LTD ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

B.	Full Name (Last, First, Middle Initial) MR. E. G. CROWELL, JR.	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 106 TUSCANY	Transaction ID: SA11.13957933
	City State Zip Code SUGAR LAND TX 77478-3350	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) MR. JACK I. CROWELL	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 3760 SAINT ANDREWS DR.	Transaction ID: SA11.13946408
	City State Zip Code RENO NV 89502-9612	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)	700.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 460 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DWAYNE CROWLEY

Mailing Address 24260 RD. F.5

City State Zip Code
CORTEZ CO 81321-9133

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949677

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. CHARLES L. CROXEN

Mailing Address 2142 E. SILVER STREET

City State Zip Code
TUCSON AZ 85719-3424

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
RETIRED

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948321

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
RICHARD CRUMBACK

Mailing Address 7514 GRANADA DR.

City State Zip Code
FORT WAYNE IN 46835-4181

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
201.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948467

Amount of Each Receipt this Period

101.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

351.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 461 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. LARRY A. CRUTCHER

Mailing Address P.O. BOX 4678

City State Zip Code
ODESSA TX 79760-4678

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
A-1 CONSTRUCTION MANAGER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13929758

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ALBERTO CRUZ

Mailing Address 245 MUDDY BRANCH RD.

City State Zip Code
GAITHERSBURG MD 20878-3003

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JCD INC. INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 435.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2010

Transaction ID: SA11.13962661

Amount of Each Receipt this Period
210.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
ANATOLIO CRUZ, III

Mailing Address 8701 FENWAY DRIVE

City State Zip Code
BETHESDA MD 20817-2711

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SCRIPPS NETWORKS INTERACTIVE, INC. ATTORNEY

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
10 / 24 / 2010

Transaction ID: SA11.13947701

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1310.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 462 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ANATOLIO CRUZ, III

Mailing Address 8701 FENWAY DRIVE

City State Zip Code
BETHESDA MD 20817-2711

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SCRIPPS NETWORKS INTERACTIVE, INC. ATTORNEY

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 1 0

Transaction ID: SA11.13947702

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
HOLLIS H. CRYER

Mailing Address P.O. BOX 1617

City State Zip Code
MONT BELVIEU TX 77580-1617

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958365

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. MATTHEW P. CUBBAGE, M.D.

Mailing Address 939 MAGDALENE

City State Zip Code
HOUSTON TX 77024-2629

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13958245

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 3540.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 463 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. SHIRLEY M. CUFF

Mailing Address 530 GARFIELD STREET

City State Zip Code
WISC RAPIDS WI 54494-4815

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946455

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. REID T. CULBERSON

Mailing Address 4708 SE MIZNER PLACE

City State Zip Code
STUART FL 34997-2173

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 920.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937226

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
ANN CULLICA

Mailing Address 304 STALLION PL

City State Zip Code
BONITA CA 91902-2321

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961687

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 464 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
LANETA CULLUM

Mailing Address 94 COUNTY ROAD 2250

City State Zip Code
VALLEY VIEW TX 76272-7627

Date of Receipt
MM / DD / YYYY
10 / 29 / 2010

Transaction ID: SA11.13962392

Amount of Each Receipt this Period
75.00

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS

Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LANETA CULLUM

Mailing Address 94 COUNTY ROAD 2250

City State Zip Code
VALLEY VIEW TX 76272-7627

Date of Receipt
MM / DD / YYYY
11 / 08 / 2010

Transaction ID: SA11.13966696

Amount of Each Receipt this Period
50.00

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS

Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT L. CULPEPPER, JR.

Mailing Address 11261 TALAMORE BLVD.

City State Zip Code
BENTONVILLE AR 72712-9042

Date of Receipt
MM / DD / YYYY
11 / 05 / 2010

Transaction ID: SA11.13966053

Amount of Each Receipt this Period
1000.00

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS

Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1125.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 465 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
SHERRY CULPEPPER

Mailing Address 4912 COUNTY RD. 15

City State Zip Code
UNION SPRINGS AL 36089-4310

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
COMM BAKER & TRUST BANKING

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 310.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936092

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
SHERRY CULPEPPER

Mailing Address 4912 COUNTY RD. 15

City State Zip Code
UNION SPRINGS AL 36089-4310

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
COMM BAKER & TRUST BANKING

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 310.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13945120

Amount of Each Receipt this Period

20.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. TIMOTHY CULPEPPER

Mailing Address 9831 SAGEWELL DR

City State Zip Code
HOUSTON TX 77089-4228

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
YOH I. & E. DESIGN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13964134

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

170.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 466 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM H. CULPEPPER, JR.
Mailing Address 708 NOTTINGHAM CT

City State Zip Code
CARMEL IN 46032-9676

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SR PRO CORP PRESIDENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13940845
Amount of Each Receipt this Period
100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DOUGLAS CULVER
Mailing Address 4550 BREEZING LN.

City State Zip Code
OXFORD NC 27565-9430

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 480.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13963213
Amount of Each Receipt this Period
40.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DOUGLAS CULVER
Mailing Address 4550 BREEZING LN.

City State Zip Code
OXFORD NC 27565-9430

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 480.00

Date of Receipt
MM / DD / YYYY
11 / 22 / 2010

Transaction ID: SA11.13972955
Amount of Each Receipt this Period
20.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 160.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 467 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
ROBERT CUMINALE

Mailing Address 912 INGRAHAM PL

City State Zip Code
CHARLOTTE NC 28270-1039

FEC ID number of contributing federal political committee. **C**

Name of Employer
ROBERTS TELLECOMMUNIACATI-
ONS INC

Occupation
SELF-EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13945694

Amount of Each Receipt this Period

30.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
ROBERT CUMINALE

Mailing Address 912 INGRAHAM PL

City State Zip Code
CHARLOTTE NC 28270-1039

FEC ID number of contributing federal political committee. **C**

Name of Employer
ROBERTS TELLECOMMUNIACATI-
ONS INC

Occupation
SELF-EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13972767

Amount of Each Receipt this Period

30.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. ANNIE CUMMINGS

Mailing Address 15196 STILLFIELD PL

City State Zip Code
CENTREVILLE VA 20120-3919

FEC ID number of contributing federal political committee. **C**

Name of Employer
BMW OF STERLING

Occupation
FINANCE MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
880.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945388

Amount of Each Receipt this Period

205.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

265.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 468 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. BRAD CUMMINGS

Mailing Address 34111 DESERT ROAD

City State Zip Code
ACTON CA 93510-1481

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
575.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953639

Amount of Each Receipt this Period

225.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. EUGENE M. CUMMINGS

Mailing Address 1290 KATHRYN LN

City State Zip Code
LAKE FOREST IL 60045-4316

FEC ID number of contributing federal political committee. **C**

Name of Employer
SELF-EMPLOYED

Occupation

ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952751

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
VIRIGNA CUMMINS

Mailing Address 174 W ATLANTIC BLVD.

City State Zip Code
OCEAN CITY NJ 08226-4604

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941273

Amount of Each Receipt this Period

30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

755.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 469 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. WILLIAM L. CUMMINGS	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 2522 GRIFFITH PARK BLVD	Transaction ID: SA11.13941109
	City State Zip Code LOS ANGELES CA 90039-2518	Amount of Each Receipt this Period 51.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer MCGARRY & LAUFENBERG	Occupation LAWYER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

B.	Full Name (Last, First, Middle Initial) KEVIN F. CUNNEEN	Date of Receipt MM / DD / YYYY 11 / 19 / 2010
	Mailing Address 1590 ASCOT TERR	Transaction ID: SA11.13972187
	City State Zip Code FLORISSANT MO 63033-3123	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 266.00	

C.	Full Name (Last, First, Middle Initial) MR. STEVEN H. CUNNINGHAM, JR.	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 15 TRANQUILITY RD	Transaction ID: SA11.13936926
	City State Zip Code MONETA VA 24121-5373	Amount of Each Receipt this Period 225.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer BELLA LUNA ASSET MGT, LLC	Occupation C.E.O.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 685.00	

SUBTOTAL of Receipts This Page (optional)	301.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 470 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. GEORGE M. CUNYUS

Mailing Address P.O. BOX 185

City State Zip Code
KILGORE TX 75663-0185

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 510.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963704

Amount of Each Receipt this Period

510.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN A. CURETON

Mailing Address 3 FENDERSON HL. N.

City State Zip Code
WILTON ME 04294-5721

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13945931

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. GAIL M. CURLE

Mailing Address 412 12TH AVENUE NE

City State Zip Code
MINOT ND 58703-1541

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 285.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931603

Amount of Each Receipt this Period

60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

670.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 471 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. DONNA G. CURRAN

Mailing Address 2233 AUSTIN BOTTOM RD.

City State Zip Code
BAXTER TN 38544-6870

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	8	/	2	0	1	0

Transaction ID: SA11.13966849

Amount of Each Receipt this Period
110.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. HAROLD F. CURRY

Mailing Address 6680 PONTIAC LAKE RD.

City State Zip Code
WATERFORD MI 48327-1757

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	6	/	2	0	1	0

Transaction ID: SA11.13956706

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN A. CURTIS

Mailing Address 17 CRYSTAL ST.

City State Zip Code
MELROSE MA 02176-2705

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	6	/	2	0	1	0

Transaction ID: SA11.13951344

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **635.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 472 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. KATHERINE CURTIS

Mailing Address 25333 AVENIDA RONADA

City VALENCIA State CA Zip Code 91355-3203

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 236.00

Date of Receipt: 11 / 02 / 2010
Transaction ID: SA11.13964720
 Amount of Each Receipt this Period: 15.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
COL ROBERT R. CURTIS

Mailing Address 2237 SW PLYMOUTH ST

City PORT SAINT LUCIE State FL Zip Code 34953-2380

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13931732
 Amount of Each Receipt this Period: 110.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GEORGE C. CUSICK

Mailing Address 436 FOSTER RD

City LEEDS State AL Zip Code 35094-3147

FEC ID number of contributing federal political committee. **C**

Name of Employer MINEARL PRODUCTS & TECHNOLOGY Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13936875
 Amount of Each Receipt this Period: 250.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **375.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 473 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. BYRON K. CUSTER, JR.
Mailing Address 852 VIEWMONT AVE.
City JOHNSTOWN State PA Zip Code 15905-1638
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 235.00
Date of Receipt 11 / 12 / 2010
Transaction ID: SA11.13968191
Amount of Each Receipt this Period 25.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. STANLEY E. CUTRER
Mailing Address 15026 NW OAKMONT LOOP
City BEAVERTON State OR Zip Code 97006-5505
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 10 / 29 / 2010
Transaction ID: SA11.13961830
Amount of Each Receipt this Period 40.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MICHAEL CYMBALA
Mailing Address 400 E HOWRY AVE APT 158
City DELAND State FL Zip Code 32724-5406
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00
Date of Receipt 10 / 25 / 2010
Transaction ID: SA11.13952188
Amount of Each Receipt this Period 35.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 100.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 474 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MICHAEL CYMBALA

Mailing Address **400 E HOWRY AVE APT 158**

City **DELAND** State **FL** Zip Code **32724-5406**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **10 / 25 / 2010**

Transaction ID: SA11.13952780

Amount of Each Receipt this Period **35.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. RENA A. CYPHERT

Mailing Address **473 KIWANIS AVE**

City **MORGANTOWN** State **WV** Zip Code **26505-2257**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **215.00**

Date of Receipt **10 / 18 / 2010**

Transaction ID: SA11.13934124

Amount of Each Receipt this Period **35.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MARTIN R. CZACHOR, SR.

Mailing Address **1671 E BOOT RD**

City **WEST CHESTER** State **PA** Zip Code **19380-6001**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **10 / 19 / 2010**

Transaction ID: SA11.13940938

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **170.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 475 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. MARTIN R. CZACHOR, SR.

Mailing Address 1671 E BOOT RD

City State Zip Code
WEST CHESTER PA 19380-6001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950334

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. GEORGE R. CZEISZPERGER

Mailing Address 125 BELLEVIEW ST

City State Zip Code
MOUNT CLEMENS MI 48043-2106

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DIABETIC CARE NETWORK CEO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 375.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928091

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
JUDITH CZUBA

Mailing Address 29 COVE SIDE LN

City State Zip Code
STONINGTON CT 06378-2902

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 235.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13932450

Amount of Each Receipt this Period

40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

290.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 476 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JUDITH CZUBA
Mailing Address 29 COVE SIDE LN
City STONINGTON State CT Zip Code 06378-2902
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 235.00
Date of Receipt 10 / 27 / 2010
Transaction ID: SA11.13958909
Amount of Each Receipt this Period 85.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. THOMAS A. D'AURIA
Mailing Address 174 RUTLEDGE AVE
City HAWTHORNE State NY Zip Code 10532-1502
FEC ID number of contributing federal political committee. **C**
Name of Employer INFORMATION METHODS INC. Occupation CONSULTANT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 900.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13934632
Amount of Each Receipt this Period 250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. THOMAS A. D'AURIA
Mailing Address 174 RUTLEDGE AVE
City HAWTHORNE State NY Zip Code 10532-1502
FEC ID number of contributing federal political committee. **C**
Name of Employer INFORMATION METHODS INC. Occupation CONSULTANT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 900.00
Date of Receipt 11 / 09 / 2010
Transaction ID: SA11.13966530
Amount of Each Receipt this Period 100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 435.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 477 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. JEAN R. DABBS

Mailing Address 5911 SOUTHERN HILLS DR.

City State Zip Code
HOUSTON TX 77069-1361

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941152

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DELPHINE H. DAFT

Mailing Address 465 STRATTON ROAD

City State Zip Code
WILLIAMSTOWN MA 01267-2985

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 12000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13945238

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. MARILYN B. DAHL

Mailing Address 96 LAKE ST.

City State Zip Code
OSHKOSH WI 54901-5441

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 576.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928962

Amount of Each Receipt this Period

210.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10310.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 478 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. ALICE DAHLGREN

Mailing Address 4901 WISTERIA DR

City State Zip Code
OKLAHOMA CITY OK 73142-1845

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation REALTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 620.00

Date of Receipt: 11 / 02 / 2010
Transaction ID: SA11.13962707
Amount of Each Receipt this Period: 210.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PAT L. DAHLSTEDT

Mailing Address 13048 FARM TO MARKET RD

City State Zip Code
MOUNT VERNON WA 98273-8705

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13938516
Amount of Each Receipt this Period: 400.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
TERRY L. DAHMER

Mailing Address 12007 ROUTE 166

City State Zip Code
MARION IL 62959-7264

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt: 10 / 27 / 2010
Transaction ID: SA11.13955784
Amount of Each Receipt this Period: 75.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 685.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 479 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
THOMAS A. DAILEY

Mailing Address 4550 MCCREADY CT.

City State Zip Code
FAIRFIELD CA 94534-1370

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931908

Amount of Each Receipt this Period
150.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. SALLY M. DALE

Mailing Address 1250 WESTVIEW CIR SE

City State Zip Code
NORTH CANTON OH 44720-4375

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
THE M. K. MORSE COMPANY PROJECT MANAGER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959371

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. R. J. DALLEY

Mailing Address 1700 KNUDSEN AVE

City State Zip Code
FARMINGTON NM 87401-2432

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
THRIFTWAY MARKETING COMPAN- VICE PRESIDENT OF OPERATIONS
NY, CORP.

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 285.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931899

Amount of Each Receipt this Period
75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1225.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 480 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DORIS S. DALLUEGE

Mailing Address 4225 SARATOGA AVE APT. 108B

City State Zip Code
DOWNERS GROVE IL 60515-1948

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 245.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943626

Amount of Each Receipt this Period

10.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DORIS S. DALLUEGE

Mailing Address 4225 SARATOGA AVE APT. 108B

City State Zip Code
DOWNERS GROVE IL 60515-1948

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 245.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13972960

Amount of Each Receipt this Period

10.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. CHARLES M. DALRYMPLE

Mailing Address 2445 HEMLOCK ROAD

City State Zip Code
EDEN NY 14057-9663

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13931419

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 481 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. CAROLYN J. DALTON

Mailing Address 762 W LAKESIDE DR

City State Zip Code
PALATINE IL 60067-2020

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935330

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MICHAEL T. DALTON

Mailing Address 1617 VIRGINIA ST.

City State Zip Code
LATROBE PA 15650-1750

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ALLEGHENY EVERGY QUANTITATIVE ANALYST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 399.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959826

Amount of Each Receipt this Period
199.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JUSTIN DALY

Mailing Address 603 14TH ST, NE

City State Zip Code
WASHINGTON DC 20002-5413

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
OGILVY GOVERNMENT RELATIO-NS LOBBYIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938792

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1299.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 482 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CHESTER DALZELL

Mailing Address 10 WEBNER PLACE

City State Zip Code
PALM COAST FL 32164-7727

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 236.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13949091

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MARK DALZELL

Mailing Address 328 S. WESTGATE AVENUE

City State Zip Code
LOS ANGELES CA 90049-4208

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CAPITAL GROUP OF COMPANIES, INC. INVESTMENT MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13943010

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
THOMAS DALZELL

Mailing Address 4729 E ARCADIA LN

City State Zip Code
PHOENIX AZ 85018-2851

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13936044

Amount of Each Receipt this Period
1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **526.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 483 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. PHILIP G. DAMASK

Mailing Address 19680 EXPLORER DRIVE

City State Zip Code
PENN VALLEY CA 95946-9432

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952415

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
ANTHONY I. DAMIANO

Mailing Address 420 TIMBER CREST LN.

City State Zip Code
ROSWELL GA 30075-1362

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
RETIRED

Aggregate Year-to-Date ▼
233.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946079

Amount of Each Receipt this Period

10.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
CLEMA M. DAMIAN

Mailing Address 39 EASTON DR.

City State Zip Code
PITTSBURGH PA 15238-1809

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
RETIRED

Aggregate Year-to-Date ▼
741.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933301

Amount of Each Receipt this Period

121.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

381.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 484 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
CLEMA M. DAMIAN

Mailing Address 39 EASTON DR.

City State Zip Code
PITTSBURGH PA 15238-1809

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 741.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956326

Amount of Each Receipt this Period
240.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. SARAH L. DAMSON

Mailing Address 1 MYERS LANE

City State Zip Code
MOBILE AL 36608-1829

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LONG'S PERSONNEL SERVICES, INC. OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961375

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. NORMA T. DANA

Mailing Address 550 PARK AVE
16C

City State Zip Code
NEW YORK NY 10065-7369

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 660.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944530

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 440.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 485 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. THEODORE N. DANFORTH

Mailing Address P.O. BOX 508

City State Zip Code
LOCUST VALLEY NY 11560-0508

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13957705

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. AUDREY L. DANIEL

Mailing Address 2825 BLOOMFIELD RD.

City State Zip Code
CPE GIRARDEAU MO 63703-6335

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948536

Amount of Each Receipt this Period
51.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. FRANCIS B. DANIEL

Mailing Address 1379 JURDY RD

City State Zip Code
SAINT PAUL MN 55121-2117

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13962423

Amount of Each Receipt this Period
30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 581.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 486 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. HAROLD T. DANIEL

Mailing Address 4829 WYNDHURST RD

City State Zip Code
LEXINGTON KY 40515-1248

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation ORAL SURGEON

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930399

Amount of Each Receipt this Period
60.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. KAREN ANN DANIEL

Mailing Address 1280 KUHN ROAD

City State Zip Code
CAROL STREAM IL 60188-9225

FEC ID number of contributing federal political committee. **C**

Name of Employer RAINBOW ACADEMY
Occupation SMALL BUSINESS OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
975.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951679

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
COL. RICHARD A. DANIELS

Mailing Address 4315 S 263RD ST

City State Zip Code
KENT WA 98032-7605

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940255

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **185.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 487 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. SCOTT L. DANIELSON

Mailing Address 340 PEPPER AVE

City State Zip Code
BURLINGAME CA 94010-6434

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PB AMERICAS ARCHITECT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946724

Amount of Each Receipt this Period
150.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. SCOTT L. DANIELSON

Mailing Address 340 PEPPER AVE

City State Zip Code
BURLINGAME CA 94010-6434

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PB AMERICAS ARCHITECT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13964454

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. VIRGINIA DANIELSON

Mailing Address 7257 MAMOUTH STREET

City State Zip Code
ENGLEWOOD FL 34224-9622

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13931344

Amount of Each Receipt this Period
55.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 305.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 488 / 3187
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JOHN DANKO

Mailing Address 2901 9TH. ST. NW

City State Zip Code
CANTON OH 44708-4370

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13941145
 Amount of Each Receipt this Period: 100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CARL DANN, III

Mailing Address 3206 GREENS AVE.

City State Zip Code
ORLANDO FL 32804-3717

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 430.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA11.13928058
 Amount of Each Receipt this Period: 110.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. KENNETH J. DANZER

Mailing Address 4926 SE ROBIN RD

City State Zip Code
PORTLAND OR 97267-3125

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt: 10 / 14 / 2010
Transaction ID: SA11.13918654
 Amount of Each Receipt this Period: 35.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **245.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 489 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) GEORGES DAOU	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 18632 VIA CATANIA	Transaction ID: SA11.13945613
	City State Zip Code RANCHO SANTA FE CA 92091-0292	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SELF-EMPLOYED INVESTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

B.	Full Name (Last, First, Middle Initial) MR. TODD DAPKUS	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 2962 ESTUARY PL	Transaction ID: SA11.13947798
	City State Zip Code MAUMEE OH 43537-9442	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

C.	Full Name (Last, First, Middle Initial) MR. PETER J. DAPUZZO	Date of Receipt MM / DD / YYYY 10 / 29 / 2010
	Mailing Address 18 PILOT ROCK LANE	Transaction ID: SA11.13959372
	City State Zip Code RIVERSIDE CT 06878-2621	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1190.00	

SUBTOTAL of Receipts This Page (optional)	2700.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 490 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MARGARET DARBY-HOEGGER

Mailing Address 10988 ARGYLL CIR

City State Zip Code
LAKEWOOD NJ 08701

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 19 / 2010

Transaction ID: SA11.13972061

Amount of Each Receipt this Period
600.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN W. DARRACQ

Mailing Address 1955 LINWOOD ST

City State Zip Code
SAN DIEGO CA 92110-2135

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
440.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 19 / 2010

Transaction ID: SA11.13940927

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOSEPH C. DARUTY

Mailing Address 1427 ELIZABETH CREST

City State Zip Code
REDLANDS CA 92373-7021

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 19 / 2010

Transaction ID: SA11.13931810

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **900.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 491 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. FRANCIS DASHNAW

Mailing Address 116 NORTHSHORE DR.

City State Zip Code
CHERRYVILLE NC 28021-8314

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
US AIRWAY INSTRUCTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 302.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954390

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JEANNE DASSEL

Mailing Address 1267 STARDUST CIRCLE

City State Zip Code
CASTLE ROCK CO 80104-7701

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13957899

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ELON J. DAUGHERTY

Mailing Address 3012 FERRAND LANE

City State Zip Code
EL DORADO AR 71730-4284

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TDC,LLC ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944410

Amount of Each Receipt this Period
75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 600.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 492 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DR. STEPHEN F. DAUGHERTY

Mailing Address 647 DUNLOP LN
100

City State Zip Code
CLARKSVILLE TN 37040-5165

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928863

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. LUCILLE DAVELLI

Mailing Address 736 BAYHILL COURT

City State Zip Code
MARION OH 43302-8006

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938689

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ARTHUR DAVENPORT

Mailing Address 7238 BIG CREEK PARKWAY

City State Zip Code
CLEVELAND OH 44130-4815

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13938075

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

200.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 493 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ARTHUR DAVENPORT

Mailing Address 7238 BIG CREEK PARKWAY

City State Zip Code
CLEVELAND OH 44130-4815

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 27 / 2010

Transaction ID: SA11.13958738

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. JANE R. DAVENPORT

Mailing Address 1 MUSCOGEE WAY NW

City State Zip Code
ATLANTA GA 30305-3580

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 19 / 2010

Transaction ID: SA11.13940940

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GERALD A. DAVID

Mailing Address 3 ORCHARD ST

City State Zip Code
MORRIS PLAINS NJ 07950-3228

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2010

Transaction ID: SA11.13959641

Amount of Each Receipt this Period
150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1200.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 494 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOHN W. DAVIDSON
Mailing Address 1095 HWY 161 N
City State Zip Code
CLOVER SC 29710-8413
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
RETIRED RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13954824
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. PATSY R. DAVIDSON
Mailing Address 9370 SE 70TH AVE
City State Zip Code
PORTLAND OR 97222-1802
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
RETIRED RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00
Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13937009
Amount of Each Receipt this Period: 20.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. PATSY R. DAVIDSON
Mailing Address 9370 SE 70TH AVE
City State Zip Code
PORTLAND OR 97222-1802
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
RETIRED RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00
Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13946337
Amount of Each Receipt this Period: 10.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 80.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 495 / 3187

(check only one)

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<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. PATSY R. DAVIDSON

Mailing Address 9370 SE 70TH AVE

City State Zip Code
PORTLAND OR 97222-1802

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 205.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13947327

Amount of Each Receipt this Period

15.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. PETER DAVIDSON

Mailing Address 7721 LEE AVE

City State Zip Code
ALEXANDRIA VA 22308-1004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
VERIZON ATTORNEY

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959326

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. DONALD DAVIES

Mailing Address 10353 FLORALITA AVE

City State Zip Code
SUNLAND CA 91040-1815

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 265.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953152

Amount of Each Receipt this Period

40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1055.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 496 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. ALAN B. DAVIS

Mailing Address P.O. BOX 2121

City State Zip Code
TUBAC AZ 85646-2121

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 501.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930245

Amount of Each Receipt this Period

101.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. ANTOINETTE ELIZABETH DAVIS

Mailing Address 1004 W A AVE

City State Zip Code
N LITTLE ROCK AR 72116-9186

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 536.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955255

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. ANTOINETTE ELIZABETH DAVIS

Mailing Address 1004 W A AVE

City State Zip Code
N LITTLE ROCK AR 72116-9186

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 536.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 7 / 2 0 1 0

Transaction ID: SA11.13969881

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

226.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 497 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. BETTY J. DAVIS

Mailing Address 9505 AUGUSTA AVENUE NE

City State Zip Code
ALBUQUERQUE NM 87111-5820

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation LNVEATOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13954544

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. CATHERINE DAVIS

Mailing Address 2272 PINE GROVE RD

City State Zip Code
FAYETTEVILLE PA 17222-8201

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 435.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13937368

Amount of Each Receipt this Period

80.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CHARLES L. DAVIS, JR.

Mailing Address 62 BERRY FARM ROAD

City State Zip Code
STAUNTON VA 24401-6435

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 206.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13934490

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

205.00

TOTAL This Period (last page this line number only) ►

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**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 498 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DR. DIANE SHIRLEY DAVIS

Mailing Address 19715 CRISTIWOOD COURT

City State Zip Code
SPRING TX 77379-2832

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955972

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
EDWIN D. DAVIS

Mailing Address P.O. BOX 869

City State Zip Code
DAYTONA BEACH FL 32115-0869

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 390.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963184

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. EDWARD H. DAVIS

Mailing Address 1933 CAMELEY CIRCLE

City State Zip Code
SANDY UT 84093-1400

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 226.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954566

Amount of Each Receipt this Period

10.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5060.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 499 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. EILEEN DAVIS

Mailing Address 501 E OLD SHAKOPEE RD., APT. 1

City State Zip Code
MINNEAPOLIS MN 55420-4972

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 346.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934239

Amount of Each Receipt this Period

1.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
GARY DAVIS

Mailing Address 25341 S 676 RD.

City State Zip Code
GROVE OK 74344-6217

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940352

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DR. HOMER B. DAVIS

Mailing Address 1117 KING OF PRUSSIA RD

City State Zip Code
WAYNE PA 19087-2831

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CROZER CHESTER MEDICAL CENTER OPHTHALMOLOGY

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959064

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

176.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 500 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. HOWARD T. DAVIS

Mailing Address 401 ASBURY RD.

City State Zip Code
CANDLER NC 28715-9456

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 305.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13942227

Amount of Each Receipt this Period

20.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. JANET S. DAVIS

Mailing Address 1121 GLEN VIEW DR.

City State Zip Code
FULLERTON CA 92835-4032

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 235.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957095

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
JEANNEMARIE DAVIS

Mailing Address 2213 ARYNESS DR.

City State Zip Code
VIENNA VA 22181

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GOVERNOR OF VIRGINIA DIRECTOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1230.63

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11A.13977524

Amount of Each Receipt this Period

1230.63

IN-KIND CONTRIBUTION

IN-KIND: CATERING

SUBTOTAL of Receipts This Page (optional)

1300.63

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 501 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JEFFREY W. DAVIS

Mailing Address 4923 EAST 49

City State Zip Code
TULSA OK 74135-7002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UNITED STATES BEEF RESTURANTEER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959409

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN C. DAVIS

Mailing Address 700 JOHN RINGLING BLVD.
T-912

City State Zip Code
SARASOTA FL 34236-1542

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
775.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935691

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHN C. DAVIS

Mailing Address 700 JOHN RINGLING BLVD.
T-912

City State Zip Code
SARASOTA FL 34236-1542

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
775.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956797

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 502 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOHN S. DAVIS

Mailing Address 1725 ROOSEVELT AVENUE

City State Zip Code
ALTADENA CA 91001-3618

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LOS ANGELES COUNTY JUVENILE COURT HEAL REGISTERED NURSE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1100.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940703

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KEITH A. DAVIS

Mailing Address 2555 KINGSTON RD SUITE 180

City State Zip Code
YORK PA 17402-3784

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 340.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950365

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. KEN D. DAVIS

Mailing Address 839 PINE HTS

City State Zip Code
RAMONA CA 92065-7622

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BAE SYSTEMS RETIRED SYSTEMS ENGINEER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 314.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945308

Amount of Each Receipt this Period
39.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 239.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 503 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. LEANN DAVIS

Mailing Address 602 W 4TH ST.

City State Zip Code
DELAVAN IL 61734-9689

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	1	0

Transaction ID: SA11.13938527

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RANDALL E. DAVIS

Mailing Address 211 WOODLAND TERRACE

City State Zip Code
ALEXANDRIA VA 22302-2914

FEC ID number of contributing federal political committee. **C**

Name of Employer STUNTZ DAVIS & STAFFIER, P.C.
Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13942463

Amount of Each Receipt this Period
4000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ROBERT DAVIS

Mailing Address 1611 CHATHAMS FORD PL

City State Zip Code
VIENNA VA 22182-4417

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED
Occupation CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	1	0

Transaction ID: SA11.13959836

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **4200.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 504 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ROBERT DAVIS

Mailing Address 1611 CHATHAMS FORD PL

City State Zip Code
VIENNA VA 22182-4417

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED CONSULTANT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 275.00

Date of Receipt
MM / DD / YYYY
10 / 29 / 2010

Transaction ID: SA11.13961417

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT M. DAVIS

Mailing Address 136 E 55TH ST APT 7A

City State Zip Code
NEW YORK NY 10022-4519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 630.00

Date of Receipt
MM / DD / YYYY
11 / 19 / 2010

Transaction ID: SA11.13972129

Amount of Each Receipt this Period
150.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. SUNEE H. DAVIS

Mailing Address 1700 LAUREL GLEN CT

City State Zip Code
LOVELAND OH 45140-7936

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 205.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13942013

Amount of Each Receipt this Period
20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 270.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 505 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
WANDA DAVIS

Mailing Address 1410 NE 201

City State Zip Code
ANDREWS TX 79714-9128

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	9	/	2	0	1	0

Transaction ID: SA11.13959126

Amount of Each Receipt this Period
45.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM H. DAVIS

Mailing Address 21 WINDING WAY

City State Zip Code
VERONA PA 15147-3888

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	6	/	2	0	1	0

Transaction ID: SA11.13969294

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HARRY DAVLANTES

Mailing Address 2048 W PRATT BLVD.

City State Zip Code
CHICAGO IL 60645-4981

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
321.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	1	0

Transaction ID: SA11.13946755

Amount of Each Receipt this Period
51.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **196.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 506 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. HUGH DAWSON

Mailing Address P.O. BOX 635

City LLANO State TX Zip Code 78643-0635

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13947835
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JONATHAN T. DAWSON, JR.

Mailing Address 6 SHOREHAVEN ROAD

City EAST NORWALK State CT Zip Code 06855-2807

FEC ID number of contributing federal political committee. **C**

Name of Employer DAWSON HERMAN CAPITAL MANAGEMENT Occupation CHAIRMAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13951114
Amount of Each Receipt this Period: 5000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. LAURIE ANN DAY

Mailing Address 2109 N PARK RD.

City HOLLYWOOD State FL Zip Code 33021-4302

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 232.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13945413
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 5140.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 507 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT M. DAY
Mailing Address P.O. BOX 710970
City SANTEE State CA Zip Code 92072-0970
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation ADVERTISING SALES
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00
Date of Receipt 10 / 26 / 2010
Transaction ID: SA11.13955643
Amount of Each Receipt this Period 250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT E. DAYTON
Mailing Address 373 LANGLAND DR
City VINTON State VA Zip Code 24179-1935
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13935049
Amount of Each Receipt this Period 50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT E. DAYTON
Mailing Address 373 LANGLAND DR
City VINTON State VA Zip Code 24179-1935
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00
Date of Receipt 10 / 25 / 2010
Transaction ID: SA11.13954966
Amount of Each Receipt this Period 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 350.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 508 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. RODERICK A. DE ARMENT

Mailing Address 420 RIVER BEND ROAD

City State Zip Code
GREAT FALLS VA 22066-4017

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
COVINGTON & BURLING ATTORNEY

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957924

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. RICHARD A. DE BONO

Mailing Address 2170 VALLEJO ST #301

City State Zip Code
SAN FRANCISCO CA 94123-4836

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13938433

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. CHARLES DE GUNZBURG

Mailing Address 12TH AVENUE & 46TH ST.
ONE INTERPID SQUARE

City State Zip Code
NEW YORK NY 10036-1007

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INTREPID SEA, AIR & SPACE MUSEUM CO-CHAIRMAN, BOARD OF TRUSTEES

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2400.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 5 / 2 0 1 0

Transaction ID: SA11.13966052

Amount of Each Receipt this Period
2400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 509 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ALAN J. DE LAURO

Mailing Address 299 SYLVAN ST

City RUTHERFORD State NJ Zip Code 07070-2828

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13954259
 Amount of Each Receipt this Period: 25.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ALAN J. DE LAURO

Mailing Address 299 SYLVAN ST

City RUTHERFORD State NJ Zip Code 07070-2828

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13954519
 Amount of Each Receipt this Period: 25.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ANTONIO J. DE LEON

Mailing Address 1360 W. 26TH PL. UNIT C406

City HIALEAH State FL Zip Code 33010-1282

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13956787
 Amount of Each Receipt this Period: 100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 150.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 510 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. EVA C. DE MARTINI

Mailing Address 1816 ADELAIDE COURT

City EAST MEADOW State NY Zip Code 11554-3906

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13939648
Amount of Each Receipt this Period: 20.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. EVA C. DE MARTINI

Mailing Address 1816 ADELAIDE COURT

City EAST MEADOW State NY Zip Code 11554-3906

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13946732
Amount of Each Receipt this Period: 16.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOHN A. DE MILIA

Mailing Address 166 DICKINSON LN

City MAHWAH State NJ Zip Code 07430-3308

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 526.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13946645
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 136.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 511 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MIKE DE PENNING

Mailing Address 906 E 14TH. ST. S

City State Zip Code
NEWTON IA 50208-5016

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 455.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13969222

Amount of Each Receipt this Period
55.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ANTHONY F. DE SIMONE

Mailing Address 273 MILLBROOK DR

City State Zip Code
E LONGMEADOW MA 01028-2677

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation INSURANCE BROKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941813

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID A. DEAN

Mailing Address 312 E. VICTORIA STREET

City State Zip Code
SANTA BARBARA CA 93101-1223

FEC ID number of contributing federal political committee. **C**

Name of Employer L M CALDWELL Occupation PHARMACIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941252

Amount of Each Receipt this Period
150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **305.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DAVID A. DEAN

Mailing Address 312 E. VICTORIA STREET

City State Zip Code
SANTA BARBARA CA 93101-1223

FEC ID number of contributing federal political committee. **C**

Name of Employer L M CALDWELL Occupation PHARMACIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941435

Amount of Each Receipt this Period
1.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LUTHER DEARBORN, JR.

Mailing Address P.O. BOX 1892

City State Zip Code
RCHO SANTA FE CA 92067-1892

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941714

Amount of Each Receipt this Period
101.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. CAROL FLORES DEEVER

Mailing Address P.O. BOX 117

City State Zip Code
RAYMOND CA 93653-0117

FEC ID number of contributing federal political committee. **C**

Name of Employer FLORISTONE Occupation HUMAN RESOURCES MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957488

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 202.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 513 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DR. JULIUS DEBROECK	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 15207 BEACHAM	Transaction ID: SA11.13959351
	City State Zip Code HOUSTON TX 77070-1403	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer SELF-EMPLOYED Occupation PHYSICIAN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	

B.	Full Name (Last, First, Middle Initial) DR. JOHN DEBUS	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 10455 N CENTRAL EXPY	Transaction ID: SA11.13955939
	City State Zip Code DALLAS TX 75231-2213	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer SELF-EMPLOYED Occupation PHYSICIAN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) MRS. GEORGIA M. DECAMP	Date of Receipt MM / DD / YYYY 10 / 29 / 2010
	Mailing Address 1630 43RD AVE. E, APT. 1002	Transaction ID: SA11.13962400
	City State Zip Code SEATTLE WA 98112-6221	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 215.00	

SUBTOTAL of Receipts This Page (optional)	5275.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 514 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. DAVID T. DECKER

Mailing Address 118 SPRUCE ST

City State Zip Code
PORT READING NJ 07064-1012

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 361.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943899

Amount of Each Receipt this Period

51.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JOHN DECORREVONT

Mailing Address 1306 SWAINWOOD DRIVE

City State Zip Code
GLENVIEW IL 60025-2842

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 7600.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945625

Amount of Each Receipt this Period

7600.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. ARLENE DEECH

Mailing Address 90 WALNUT DRIVE

City State Zip Code
ROSLYN NY 11576-2333

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931665

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

7761.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 516 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. THOMAS S. DEIWERT

Mailing Address 100 RILEY RD

City State Zip Code
DELPHI IN 46923-1803

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 370.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929090

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
LOUISE M. DEL TRECCO

Mailing Address 41 ORCHARDHILL RD #1

City State Zip Code
JAMAICA PLAIN MA 02130-3724

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 226.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932532

Amount of Each Receipt this Period
51.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. EDWARD W. DELANEY

Mailing Address 63 GIBSON ST.

City State Zip Code
CANANDAIGUA NY 14424-1336

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 576.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Transaction ID: SA11.13968169

Amount of Each Receipt this Period
30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **131.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 517 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. LAWRENCE J. DELANEY	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 1 ATASCADERO	Transaction ID: SA11.13941732
	City State Zip Code IRVINE CA 92602-1092	Amount of Each Receipt this Period 101.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 201.00

B.	Full Name (Last, First, Middle Initial) MRS. JUNE DELAY	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 39 TOWER HILL RD APT 4B	Transaction ID: SA11.13955161
	City State Zip Code OSTERVILLE MA 02655-1646	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00

C.	Full Name (Last, First, Middle Initial) DR. JOSEPH R. DELEO	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 9 PARK VIEW RD	Transaction ID: SA11.13941581
	City State Zip Code CRANBURY NJ 08512-2732	Amount of Each Receipt this Period 51.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SELF-EMPLOYED Occupation VETERINARIAN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 226.00

SUBTOTAL of Receipts This Page (optional)	▶	212.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 518 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DAVID A. DELIZZA

Mailing Address 729 WHITMAN DRIVE

City State Zip Code
TURNERSVILLE NJ 08012-1332

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PENNONI ASSOCIATES ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 625.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13957947

Amount of Each Receipt this Period
125.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. JAMIE L. DELORENZO

Mailing Address 2555 OBSERVATORY AVE

City State Zip Code
CINCINNATI OH 45208-2009

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GREGORY J. DELORENZO, IN.C NURSE/RN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 1 0

Transaction ID: SA11.13966565

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN Z. DELP

Mailing Address 43 HOLBROOK LN.

City State Zip Code
WILLINGBORO NJ 08046-1847

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13971597

Amount of Each Receipt this Period
105.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **330.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 519 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
ALEX DELPIZZO

Mailing Address 819 7TH ST. NW
SUITE 501

City State Zip Code
WASHINGTON DC 20001-3865

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WINNING STRATEGIES WASHIN-
GTON GOVERNMENT AFFAIRS

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959400

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. JOAN D. DELVECCHIO

Mailing Address 25 BRINSMAYD AVE

City State Zip Code
STRATFORD CT 06614-1362

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13965347

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. THOMAS W. DEMAAGD

Mailing Address 3555 BURLINGAME AVE SW

City State Zip Code
WYOMING MI 49509

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BURLINGAME DAIRY DIP OWNER

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
360.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931866

Amount of Each Receipt this Period

360.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

560.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 520 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. JAMES DEMARE	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 25 N. MOORE ST. #4B	Transaction ID: SA11.13951057
	City State Zip Code NEW YORK NY 10013-2461	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation BANK OF AMERICA INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MR. ROBERT DEMARS	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 80585 VIA TALAVERA	Transaction ID: SA11.13932254
	City State Zip Code LA QUINTA CA 92253-9008	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MR. JOHN B. DEMERS	Date of Receipt MM / DD / YYYY 11 / 19 / 2010
	Mailing Address 1719 E. BIJOU STREET APARTMENT 910	Transaction ID: SA11.13972105
	City State Zip Code COLORADO SPRINGS CO 80909-5752	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS AIR FORCE RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.00	CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	3100.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 521 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. JOHN B. DEMERS	Date of Receipt MM / DD / YYYY 11 / 19 / 2010
	Mailing Address 1719 E. BIJOU STREET APARTMENT 910	Transaction ID: SA11.13972151
	City State Zip Code COLORADO SPRINGS CO 80909-5752	Amount of Each Receipt this Period 2.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS AIR FORCE RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.00	

B.	Full Name (Last, First, Middle Initial) PAUL T. DEMET	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 107 EDGEMERE DR	Transaction ID: SA11.13934757
	City State Zip Code FAIRFEILD GLADE TN 38558-2873	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 295.00	

C.	Full Name (Last, First, Middle Initial) MRS. PEGGY A. DEMITRACK	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 17804 LAKE ROAD	Transaction ID: SA11.13958225
	City State Zip Code LAKEWOOD OH 44107-1017	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation CLEVELAND INSTITUTE OF MUSIC PIANO TEACHER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00	

SUBTOTAL of Receipts This Page (optional)	152.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 522 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
HELEN F. DENNIS

Mailing Address P.O. BOX 893

City State Zip Code
STAFFORD VA 22555-0893

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13947241

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BARBARA A. DENNY

Mailing Address 7403 MULBERRY RD.

City State Zip Code
HANOVER MD 21076-1590

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13939340

Amount of Each Receipt this Period
10.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. NIXON EDWARD DENTON

Mailing Address 1709 LANTANA DR.

City State Zip Code
MINDEN NV 89423-5103

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 569.00

Date of Receipt
MM / DD / YYYY
10 / 20 / 2010

Transaction ID: SA11.13938561

Amount of Each Receipt this Period
110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 170.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 523 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ROBERT KELSEY DENTON		Date of Receipt
	Mailing Address 2212 WROXTON RD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	City	State	Zip Code
	HOUSTON	TX	77005-1536
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13952925
		Amount of Each Receipt this Period	
		<input type="text"/> 250.00	
Name of Employer CHEVRON		Occupation ENGINEER	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 1150.00	

B.	Full Name (Last, First, Middle Initial) MRS. JUDITH DEPEW		Date of Receipt
	Mailing Address RR 2 BOX 514A		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	City	State	Zip Code
	BEAVER	OK	73932-9616
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13947748
		Amount of Each Receipt this Period	
		<input type="text"/> 50.00	
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 210.00	

C.	Full Name (Last, First, Middle Initial) MR. MICHAEL DEROSA		Date of Receipt
	Mailing Address 3 RADNOR CORP CENTER SUITE 410		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 6 / 2 0 1 0
	City	State	Zip Code
	RADNOR	PA	19087-4546
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13955987
		Amount of Each Receipt this Period	
		<input type="text"/> 1000.00	
Name of Employer ELEMANT PARTNERS		Occupation MANAGING DIRECTOR	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 1000.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1300.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 524 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CARL R. DESANTIS, SR.
Mailing Address P.O. BOX 1239

City State Zip Code
BOLTON LNDG NY 12814-1239

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 301.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0
Transaction ID: SA11.13932662
Amount of Each Receipt this Period
101.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOSEPH R. DESIMONE
Mailing Address 5609 SW MANNING STREET

City State Zip Code
SEATTLE WA 98116-3149

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0
Transaction ID: SA11.13962419
Amount of Each Receipt this Period
100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT W. DESLONGCHAMPS
Mailing Address 4512 WAKEFIELD CHAPEL ROAD

City State Zip Code
ANNANDALE VA 22003-4529

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
US GOVERNMENT CIVIL SERVANT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0
Transaction ID: SA11.13941795
Amount of Each Receipt this Period
100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 301.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 525 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. AMELIA T. DESZYCK

Mailing Address P.O. BOX 31

City State Zip Code
BETHANIA NC 27010-0031

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936881

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. ANNA H. DETTERMAN

Mailing Address 4320 JOHN SILVER RD.

City State Zip Code
VIRGINIA BCH VA 23455-2134

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940144

Amount of Each Receipt this Period
10.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. FRED J. DETTWYLER

Mailing Address 12113 HOBART RD NE

City State Zip Code
SILVERTON OR 97381-9613

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955022

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **760.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 526 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WAYNE DEVEREUX

Mailing Address 517 GUNSMOKE TRL

City LUSBY State MD Zip Code 20657-2534

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13938576
Amount of Each Receipt this Period: 110.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. MELBA A. DEW

Mailing Address PO BOX 616

City TARBORO State NC Zip Code 27886-0616

FEC ID number of contributing federal political committee. **C**

Name of Employer FORBES INSURANCE AGENCY
Occupation OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13951315
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ROBERT DEWEESE

Mailing Address 550 EDGEWOOD DR.

City EUPORA State MS Zip Code 39744-9418

FEC ID number of contributing federal political committee. **C**

Name of Employer DEWEESE TITLE LOAN LLC
Occupation BUS OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13935568
Amount of Each Receipt this Period: 150.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 360.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 527 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DON DEWHURST

Mailing Address 3425 SEACREST DR.

City State Zip Code
CARLSBAD CA 92008-2038

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DEWHURST & ASSOCIATES CONTRACTOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 385.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934108

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ARLEN J. DEWIT

Mailing Address 3055 HICKORY AVENUE

City State Zip Code
HULL IA 51239-7425

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
VANHY, INC. TRUCK DRIVER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 235.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933735

Amount of Each Receipt this Period
10.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ARLEN J. DEWIT

Mailing Address 3055 HICKORY AVENUE

City State Zip Code
HULL IA 51239-7425

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
VANHY, INC. TRUCK DRIVER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 235.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935321

Amount of Each Receipt this Period
10.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 120.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 528 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ARLEN J. DEWIT

Mailing Address 3055 HICKORY AVENUE

City State Zip Code
HULL IA 51239-7425

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
VANHY, INC. TRUCK DRIVER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944465

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RUSSELL G. DEWITT

Mailing Address 19355 CYPRESS RIDGE TERRACE UN

City State Zip Code
LEESBURG VA 20176

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED INDEPENDENT CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941891

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. JANET S. DEY

Mailing Address 29968 MARQUETTE ST

City State Zip Code
GARDEN CITY MI 48135-2654

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944991

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **100.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 529 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. JANET S. DEY

Mailing Address 29968 MARQUETTE ST

City State Zip Code
GARDEN CITY MI 48135-2654

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13960583

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. GLORIA DEYOUNG

Mailing Address 20376 PAUL PL NE

City State Zip Code
KINGSTON WA 98346-9115

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963757

Amount of Each Receipt this Period
35.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
OWEN E. DHONAU

Mailing Address 3634 WINDSOR ST.

City State Zip Code
IRVING TX 75062-7424

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 207.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956079

Amount of Each Receipt this Period
20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 105.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 530 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. GEORGE DI PLACIDI

Mailing Address 1530 PALISADE AVE APT 6S

City State Zip Code
FORT LEE NJ 07024-5402

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1001.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936965

Amount of Each Receipt this Period

300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. GEORGE DI PLACIDI

Mailing Address 1530 PALISADE AVE APT 6S

City State Zip Code
FORT LEE NJ 07024-5402

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1001.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 4 / 2 0 1 0

Transaction ID: SA11.13965506

Amount of Each Receipt this Period

301.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. CLAIRE DIAMOND

Mailing Address 3850 WASHINGTON ST APT 902

City State Zip Code
HOLLYWOOD FL 33021-7356

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938591

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

711.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 531 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. LLOYD DIBB

Mailing Address 3309 ROUTE 66

City State Zip Code
NEW BETHLEHEM PA 16242-4743

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 525.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956018

Amount of Each Receipt this Period
2.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. JEAN E. DIBBLE

Mailing Address 65 EDMOND DR

City State Zip Code
NORTH KINGSTOWN RI 02852-2413

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS LOAFER NO.1

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 211.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941706

Amount of Each Receipt this Period
51.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. JEAN E. DIBBLE

Mailing Address 65 EDMOND DR

City State Zip Code
NORTH KINGSTOWN RI 02852-2413

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS LOAFER NO.1

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 211.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13960080

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 153.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 532 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. LENA M. DICE

Mailing Address 1033 FAIRVIEW AVE

City State Zip Code
CANON CITY CO 81212-2853

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941691

Amount of Each Receipt this Period
6.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. LENA M. DICE

Mailing Address 1033 FAIRVIEW AVE

City State Zip Code
CANON CITY CO 81212-2853

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949222

Amount of Each Receipt this Period
20.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. LENA M. DICE

Mailing Address 1033 FAIRVIEW AVE

City State Zip Code
CANON CITY CO 81212-2853

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952084

Amount of Each Receipt this Period
10.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **36.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 533 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. DAVID W. DICK

Mailing Address P.O. BOX 1856

City State Zip Code
EL PASO TX 79950-1856

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LIFE INSURANCE SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 355.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13942853

Amount of Each Receipt this Period
60.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JOHN P. DICK

Mailing Address 9420 CEDAR LAKE AVE

City State Zip Code
OKLAHOMA CITY OK 73114-7809

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PETROLEUM ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2010

Transaction ID: SA11.13951623

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. CHARLES D. DICKEY

Mailing Address 32 DRAKE LN

City State Zip Code
SCARBOROUGH ME 04074-7414

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13962917

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **810.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 534 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. EVELYN N. DICKERSON

Mailing Address 113 WILD ROSE LN

City State Zip Code
ROCHESTER IL 62563-9224

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 355.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933753

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JIMMY D. DICKETTS

Mailing Address 9391 CALIFORNIA AVE
SPC 34

City State Zip Code
RIVERSIDE CA 92503-3221

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ACE SMOG MANAGER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931812

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
KARIN DICKERSON

Mailing Address 805 KINGD PASSAGE DR.2B

City State Zip Code
RICHMOND VA 23238-6085

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940801

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

150.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 535 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. MILDRED E. DICKSON

Mailing Address 5044 CAHUENGA BLVD APT 9

City State Zip Code
NORTH HOLLYWOOD CA 91601-4749

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 315.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937805

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. MAE DIDLAKE

Mailing Address 635 VIA SANTA CRUZ

City State Zip Code
VISTA CA 92081-6336

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 241.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941713

Amount of Each Receipt this Period

41.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. EVERARD D. DIEDRICK

Mailing Address 19864 TATTNALL WAY

City State Zip Code
BROOKSVILLE FL 34601-6476

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956265

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

241.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 536 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. ANTOINETTE DIEMER

Mailing Address 10919 MAIDEN DR.

City State Zip Code
BOWIE MD 20720-3599

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936153

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. EUGENE R. DIERCKS

Mailing Address 6705 PINE ST

City State Zip Code
VESPER WI 54489-9444

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 7 / 2 0 1 0

Transaction ID: SA11.13969886

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JOHN SAMUEL DIEU

Mailing Address 185 COTTONWOOD LN.

City State Zip Code
WICKENBURG AZ 85390-3306

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1350.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933439

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **325.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 537 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. VALENTINO F. DIGIORGIO, III

Mailing Address 328 HIDDEN FARM DRIVE

City EXTON State PA Zip Code 19341-1185

FEC ID number of contributing federal political committee. **C**

Name of Employer STRADLEY RONON Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13957951
Amount of Each Receipt this Period: 500.00
CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
JONATHAN DILL

Mailing Address 10591 GLEN LAKES DR

City BONITA SPRINGS State FL Zip Code 34135-7237

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 16 / 2010
Transaction ID: SA11.13928689
Amount of Each Receipt this Period: 500.00
CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. PHYLLIS P. DILL

Mailing Address P.O. BOX 451

City DAYTON State TN Zip Code 37321-0451

FEC ID number of contributing federal political committee. **C**

Name of Employer CONTINENTAL CAR CLUB Occupation OFFICE MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 580.00

Date of Receipt: 11 / 02 / 2010
Transaction ID: SA11.13964801
Amount of Each Receipt this Period: 210.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1210.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 538 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. KARIN D. DILLARD

Mailing Address 3033 CHATTAHOOCHEE TRCE

City State Zip Code
GAINESVILLE GA 30506-2103

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931671

Amount of Each Receipt this Period

75.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. MARK DILLARD

Mailing Address 5 HENRY

City State Zip Code
IRVINE CA 92620-3257

FEC ID number of contributing federal political committee. **C**

Name of Employer
STEINY AND COMPANY, INC.

Occupation

SENIOR PROJECT MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951558

Amount of Each Receipt this Period

175.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. WILLAM J. DILLER, JR.

Mailing Address 59 HERON DR

City State Zip Code
AVALON NJ 08202-1540

FEC ID number of contributing federal political committee. **C**

Name of Employer
SELF-EMPLOYED

Occupation

SELF-EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
460.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941915

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 539 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DAVID R. DILLINGER

Mailing Address 181 HUNTINGTON ROAD NE

City State Zip Code
THOMSON GA 30824-5441

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932806

Amount of Each Receipt this Period
81.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ALEXANDER DIMITRIEF

Mailing Address 223 BAYBERRY LANE

City State Zip Code
WESTPORT CT 06880-1605

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GE LAWYER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13932259

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. TAMARA DIMITRI

Mailing Address 21314 LASSEN STREET

City State Zip Code
CHATSWORTH CA 91311-4254

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DELTA TAU DATA SYSTEMS, INC. VICE PRESIDENT OF FINANCES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931533

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 2081.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 540 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. STEVEN A. DINGELDEIN

Mailing Address 3103 ABINGDON PL.

City State Zip Code
BURLINGTON NC 27215-4689

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1130.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	6	/	2	0	1	0

Transaction ID: SA11.13951619

Amount of Each Receipt this Period
310.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ANNE R. DINNEGAN

Mailing Address 4011 PALM TREE BLVD. APT. 303

City State Zip Code
CAPE CORAL FL 33904-8919

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
682.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13932491

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ANNE R. DINNEGAN

Mailing Address 4011 PALM TREE BLVD. APT. 303

City State Zip Code
CAPE CORAL FL 33904-8919

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
682.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13936968

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **410.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 541 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ANNE R. DINNEGAN

Mailing Address 4011 PALM TREE BLVD. APT. 303

City State Zip Code
CAPE CORAL FL 33904-8919

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 682.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13937718

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ANNE R. DINNEGAN

Mailing Address 4011 PALM TREE BLVD. APT. 303

City State Zip Code
CAPE CORAL FL 33904-8919

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 682.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13951013

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ANNE R. DINNEGAN

Mailing Address 4011 PALM TREE BLVD. APT. 303

City State Zip Code
CAPE CORAL FL 33904-8919

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 682.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2010

Transaction ID: SA11.13956553

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 150.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 542 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ANNE R. DINNEGAN

Mailing Address 4011 PALM TREE BLVD. APT. 303

City State Zip Code
CAPE CORAL FL 33904-8919

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 682.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13956997
Amount of Each Receipt this Period: 31.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ERIC DISARRO

Mailing Address 8 CLOVER LN

City State Zip Code
LOUDONVILLE NY 12211-1616

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13951507
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES R. DISSETDE

Mailing Address 7317 LAKERIDGE RD

City State Zip Code
SOUTH HAVEN MI 49090-9505

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13936173
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 121.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 543 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JOANNE A. DISSINGER

Mailing Address 231 MAPLE AVE

City State Zip Code
QUARRYVILLE PA 17566-1319

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
221.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13936709

Amount of Each Receipt this Period
21.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. HAROLD E. DITTMER

Mailing Address 650 BERCUT DRIVE

City State Zip Code
SACRAMENTO CA 95811-0100

FEC ID number of contributing federal political committee. **C**

Name of Employer WELLHEAD ELECTRIC COMPANY
Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	5	/	2	0	1	0

Transaction ID: SA11.13928668

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HAROLD E. DITTMER

Mailing Address 650 BERCUT DRIVE

City State Zip Code
SACRAMENTO CA 95811-0100

FEC ID number of contributing federal political committee. **C**

Name of Employer WELLHEAD ELECTRIC COMPANY
Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	5	/	2	0	1	0

Transaction ID: SA11.13928669

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **10021.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 544 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JIMMY DIXON, JR.

Mailing Address 144 GOLFCLUB DR

City State Zip Code
ELIZABETH CTY NC 27909-3254

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CITY BEVERAGE CO, INC. WHOLESALE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13965313

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. KENNETH C. DIXON

Mailing Address 195 NORTHEAST AVE

City State Zip Code
TALLMADGE OH 44278-1450

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TALLMADGE COLLISION OWNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930124

Amount of Each Receipt this Period

60.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. MARGIE W. DIXON

Mailing Address 10724 E TIMBERWAGON CIR.

City State Zip Code
SPRING TX 77380-4048

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED ENGINEER/TEACHER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13945926

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

210.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 545 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) OLIN L. DIXON		Date of Receipt MM / DD / YYYY 10 / 20 / 2010		
	Mailing Address 3346 CHANTARENE DR		Transaction ID: SA11.13943372		
	City PENSACOLA	State FL	Zip Code 32507-3549	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00			

B.	Full Name (Last, First, Middle Initial) PATRICIA DIXON		Date of Receipt MM / DD / YYYY 10 / 22 / 2010		
	Mailing Address 7747 GRACKLE CT		Transaction ID: SA11.13949301		
	City ALEXANDRIA	State VA	Zip Code 22306-2950	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
Name of Employer NSRMCA		Occupation EXEC ASST			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 316.00			

C.	Full Name (Last, First, Middle Initial) PATRICIA DIXON		Date of Receipt MM / DD / YYYY 11 / 09 / 2010		
	Mailing Address 7747 GRACKLE CT		Transaction ID: SA11.13966553		
	City ALEXANDRIA	State VA	Zip Code 22306-2950	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
Name of Employer NSRMCA		Occupation EXEC ASST			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 316.00			

SUBTOTAL of Receipts This Page (optional) ▶

225.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 546 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. THOMAS E. DIXON

Mailing Address 5210 OVERRIDGE DR.

City State Zip Code
ARLINGTON TX 76017-1244

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 306.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939042

Amount of Each Receipt this Period

26.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. NORMAN DOBSON

Mailing Address 109 LOWELL STREET

City State Zip Code
PEABODY MA 01960-4257

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 206.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13964879

Amount of Each Receipt this Period

60.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. NORMAN DOBSON

Mailing Address 109 LOWELL STREET

City State Zip Code
PEABODY MA 01960-4257

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 206.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 1 0

Transaction ID: SA11.13967539

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

111.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 547 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
THOMAS DOBSON

Mailing Address 2121 COUNTRYMAN LANE

City State Zip Code
LA CANADA FLINTRID CA 91011-1325

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959968

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ROBERT DODD

Mailing Address 36W250 BURNING OAK RD.

City State Zip Code
DUNDEE IL 60118-9268

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936238

Amount of Each Receipt this Period
70.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ROBERT DODD

Mailing Address 36W250 BURNING OAK RD.

City State Zip Code
DUNDEE IL 60118-9268

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13964654

Amount of Each Receipt this Period
70.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **190.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 548 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
SUZANNE DODD

Mailing Address 171 GEORGIA DR.

City State Zip Code
LEESVILLE SC 29070-7160

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2010

Transaction ID: SA11.13931126

Amount of Each Receipt this Period
15.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SUZANNE DODD

Mailing Address 171 GEORGIA DR.

City State Zip Code
LEESVILLE SC 29070-7160

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13937324

Amount of Each Receipt this Period
15.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT M. DODDS

Mailing Address 33019 SUNRISE DR.

City State Zip Code
MAGNOLIA TX 77354-2629

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2010

Transaction ID: SA11.13964783

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 80.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 549 / 3187
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. NICHOLAS DODGE

Mailing Address P.O. BOX 267

City State Zip Code
COULTERVILLE CA 95311-0267

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952789

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROGER B. DODGE

Mailing Address 30 CAMPFIELD ROAD

City State Zip Code
MANCHESTER CT 06040-4940

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
446.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944477

Amount of Each Receipt this Period
30.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROGER B. DODGE

Mailing Address 30 CAMPFIELD ROAD

City State Zip Code
MANCHESTER CT 06040-4940

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
446.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953270

Amount of Each Receipt this Period
30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **160.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 550 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM A. DODSON

Mailing Address 104 SKI CT

City State Zip Code
HAVELOCK NC 28532-9388

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13950279

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ALAN L. DOERMAN

Mailing Address 3737 SAN CARLOS DR.

City State Zip Code
ST JAMES CITY FL 33956-2202

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
MM / DD / YYYY
10 / 29 / 2010

Transaction ID: SA11.13961445

Amount of Each Receipt this Period
6.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM DOERRER

Mailing Address 1905 WILMONT AVE

City State Zip Code
PANAMA CITY FL 32405-2452

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 212.01

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13932995

Amount of Each Receipt this Period
31.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 77.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 551 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. JOYCE B. DOHENY

Mailing Address 4383 ROYAL PL

City State Zip Code
HONOLULU HI 96816-4855

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13963681

Amount of Each Receipt this Period: 100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. EDWARD D. DOHERTY

Mailing Address 4039 HERSCHEL AVENUE

City State Zip Code
DALLAS TX 75219-2931

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt: MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13940677

Amount of Each Receipt this Period: 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES A. DOIG

Mailing Address 808 NE 102ND AVE.

City State Zip Code
PORTLAND OR 97220-4007

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt: MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13951897

Amount of Each Receipt this Period: 40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1140.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 552 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. CHARLES F. DOLAN	Date of Receipt MM / DD / YYYY 11 / 18 / 2010
	Mailing Address 119 COVE NECK RD	Transaction ID: SA11.13969758
	City State Zip Code OYSTER BAY NY 11771-1822	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer CABLE VISIONS CORPORATION	Occupation CHAIRMAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) V DOLAN	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 1796 E 200 S	Transaction ID: SA11.13944639
	City State Zip Code RUSHVILLE IN 46173-7765	Amount of Each Receipt this Period 51.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	

C.	Full Name (Last, First, Middle Initial) V DOLAN	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 1796 E 200 S	Transaction ID: SA11.13952403
	City State Zip Code RUSHVILLE IN 46173-7765	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	

SUBTOTAL of Receipts This Page (optional)	351.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 553 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
V DOLAN

Mailing Address 1796 E 200 S

City State Zip Code
RUSHVILLE IN 46173-7765

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
251.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13952628

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM DOLAN

Mailing Address 410 BANK ST

City State Zip Code
PAINESVILLE OH 44077-3704

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	1	0

Transaction ID: SA11.13970062

Amount of Each Receipt this Period
30.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DONALD D. DOLSON

Mailing Address 505 N. HUTCHESON STREET

City State Zip Code
HOUSTON TX 77003-1343

FEC ID number of contributing federal political committee. **C**

Name of Employer QUIATARD
Occupation ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	1	0

Transaction ID: SA11.13944597

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **120.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 554 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JOHN DOMMERT
Mailing Address 13218 WINDY OAKS ST.
City BEACH CITY State TX Zip Code 77523-9262
FEC ID number of contributing federal political committee. **C**
Name of Employer SNC-LAVALIN Occupation INSTRUMENT DESIGNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13929236
Amount of Each Receipt this Period 110.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MATTHEW DOMSIC
Mailing Address 17020 16 MILE RD
City MARSHALL State MI Zip Code 49068-9494
FEC ID number of contributing federal political committee. **C**
Name of Employer DOD CIVILIAN Occupation BUSINESS ANALYST
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00
Date of Receipt 10 / 25 / 2010
Transaction ID: SA11.13953335
Amount of Each Receipt this Period 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. ROMA I. DONAIS
Mailing Address 23 PARK ST
City EASTHAMPTON State MA Zip Code 01027-2153
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 290.00
Date of Receipt 10 / 21 / 2010
Transaction ID: SA11.13946285
Amount of Each Receipt this Period 25.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 235.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. ROMA I. DONAIS

Mailing Address 23 PARK ST

City EASTHAMPTON State MA Zip Code 01027-2153

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt: 10 / 29 / 2010
Transaction ID: SA11.13962021
 Amount of Each Receipt this Period: 25.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILLIAM DONALDSON

Mailing Address 54 LEDGE RD

City GLOUCESTER State MA Zip Code 01930-4273

FEC ID number of contributing federal political committee. **C**

Name of Employer NORTHEAST HEALTH SYSTEM Occupation LAWYER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13933614
 Amount of Each Receipt this Period: 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DAVID E. DONNELL

Mailing Address 1731 CARRIGAN LN.

City UKIAH State CA Zip Code 95482-3309

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13951514
 Amount of Each Receipt this Period: 110.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 235.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 556 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JOE DONOVAN
 Mailing Address 816 MILWAUKEE AVE
 City State Zip Code
WAUKESHA WI 53188-3044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
MOTORCYCLING ENTERPRISES S.R. MOTORCYCLE SAFTEY INSTRUCTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00
 Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13957041
 Amount of Each Receipt this Period: 100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RUTH DORAN
 Mailing Address 672 E DESERT PARK LN
 City State Zip Code
COTTONWOOD AZ 86326-4982
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
RETIRED RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 640.00
 Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13955143
 Amount of Each Receipt this Period: 200.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. ANNE DORIS
 Mailing Address 90 ALLEN RD APT 26
 City State Zip Code
S BURLINGTON VT 05403-7918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
RETIRED RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00
 Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13943576
 Amount of Each Receipt this Period: 20.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 320.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 557 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. ANNE DORIS

Mailing Address 90 ALLEN RD
APT 26

City State Zip Code
S BURLINGTON VT 05403-7918

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2010

Transaction ID: SA11.13956692

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DAVID E. DORMAN

Mailing Address 8 SHADYWOOD LANE

City State Zip Code
MELISSA TX 75454-2121

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2010

Transaction ID: SA11.13965645

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JOHN D. DORSETT

Mailing Address 2565 MAIN ST

City State Zip Code
LAWRENCE TWP NJ 08648-1657

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
O.T. CONSULTING SERVICES MGMT CONSULTING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt
MM / DD / YYYY
10 / 16 / 2010

Transaction ID: SA11.13928703

Amount of Each Receipt this Period
110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **635.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 558 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. FREDERIC DORWART

Mailing Address 124 EAST FOURTH STREET

City State Zip Code
TULSA OK 74103-5027

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED LAWYER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13951119

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DR. STOKELY B. DOSTER

Mailing Address 312 FAIRY TRL

City State Zip Code
LOOKOUT MOUNTAIN TN 37350-1606

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 265.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951526

Amount of Each Receipt this Period

60.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. E R. DOTSON

Mailing Address 627 PINE HILL WAY

City State Zip Code
SANDERSVILLE GA 31082-2057

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13947093

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1110.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 559 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
BETTY J. DOUGHTY

Mailing Address 1 W BERWIN WAY

City State Zip Code
MOUNT LAUREL NJ 08054-3014

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 466.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937321

Amount of Each Receipt this Period

10.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. LINDA DOUGLAS

Mailing Address 11810 GREY BIRCH PLACE

City State Zip Code
RESTON VA 20191-4223

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 285.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962542

Amount of Each Receipt this Period

35.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. PRISCILLA DOUGLAS

Mailing Address 301 CLUSTER ST

City State Zip Code
FOLEY AL 36535-2341

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933668

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

145.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 560 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. EDWARD G. DOVEY, III

Mailing Address 145 CRESCENT ST

City State Zip Code
ELKHART IN 46516-4425

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
COMCAST CABLE SYSTEM TECH

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 335.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931859

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. LINDA D. DOWLING

Mailing Address 300 PIERREMONT RD UNIT 28

City State Zip Code
SHREVEPORT LA 71106-2233

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949625

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. KATHERINE S. DOWNES

Mailing Address 106 LAURISTON ST.

City State Zip Code
PROVIDENCE RI 02906-3643

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 7 / 2 0 1 0

Transaction ID: SA11.13977507

Amount of Each Receipt this Period
-60.00

CONTRIBUTION

CHARGED BACK

SUBTOTAL of Receipts This Page (optional) ► **190.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 561 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. RICHARD DOWNEY

Mailing Address 3314 WEDDE ROAD

City State Zip Code
BARNHART MO 63012-1862

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 253.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936023

Amount of Each Receipt this Period

2.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. FRANCES E. DOWNS

Mailing Address 878 HIGHWAY 442

City State Zip Code
SHAW MS 38773-9742

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 610.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945332

Amount of Each Receipt this Period

210.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
RAISSA H. DOWNS

Mailing Address 1212 NEW YORK AVENUE, NW
SUITE 1050

City State Zip Code
WASHINGTON DC 20005-6135

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TARPLIN, DOWNS, & YOUNG LLC PARTNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13942506

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

712.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 562 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. THOMAS A. DOWNS, SR.
Mailing Address 1412 REPUBLIC PL
City MELBOURNE State FL Zip Code 32940-6739
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00
Date of Receipt 10 / 20 / 2010
Transaction ID: SA11.13944408
Amount of Each Receipt this Period 300.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. HARRY DOZIER
Mailing Address 3238 NE BRYCE STREET
City PORTLAND State OR Zip Code 97212-1723
FEC ID number of contributing federal political committee. **C**
Name of Employer BRAKE SYSTEMS INC Occupation ENGINEER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13931759
Amount of Each Receipt this Period 200.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GARY DRAGO
Mailing Address 353 HALSTEAD AVE.
127
City HARRISON State NY Zip Code 10528-3727
FEC ID number of contributing federal political committee. **C**
Name of Employer PMC CONSULTING CO. Occupation OWNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13928816
Amount of Each Receipt this Period 150.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 650.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 563 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WALTER H. DRAKEFORD

Mailing Address 601 JEFFERSON DAVIS HWY.

City State Zip Code
FREDERICKSBURG VA 22401-4436

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DRAKEFORD & DRAKEFORD FORENSIC ACCOUNTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 261.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13936716
Amount of Each Receipt this Period: 21.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WALTER H. DRAKEFORD

Mailing Address 601 JEFFERSON DAVIS HWY.

City State Zip Code
FREDERICKSBURG VA 22401-4436

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DRAKEFORD & DRAKEFORD FORENSIC ACCOUNTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 261.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13937020
Amount of Each Receipt this Period: 80.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID R. DRAPER

Mailing Address 9132 COVINGTON RIDGE CT

City State Zip Code
MECHANICSVILLE VA 23116-7205

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt: 11 / 01 / 2010
Transaction ID: SA11.13960749
Amount of Each Receipt this Period: 200.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 301.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 564 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
GALEN E. DREIBELBIS

Mailing Address 100 W NORTH HILLS PL.

City State Zip Code
STATE COLLEGE PA 16803-2919

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
640.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	2	/	2	0	1	0

Transaction ID: SA11.13962494

Amount of Each Receipt this Period
400.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROGER IRVING DREIKORN

Mailing Address 1109 WILLSHIRE DR.

City State Zip Code
MUSKEGON MI 49445-2088

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
415.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	6	/	2	0	1	0

Transaction ID: SA11.13957440

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HENRY D. DREISILKER

Mailing Address 148 LONGFELLOW DR.

City State Zip Code
WHEATON IL 60189-7410

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
276.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	1	0

Transaction ID: SA11.13941517

Amount of Each Receipt this Period
26.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **476.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 565 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. HENRY D. DREISILKER

Mailing Address 148 LONGFELLOW DR.

City State Zip Code
WHEATON IL 60189-7410

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 276.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959610

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. RAE DREITH

Mailing Address P.O. BOX 4032

City State Zip Code
EAGLE CO 81631-4032

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13947852

Amount of Each Receipt this Period
45.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. FRANK E. DRENNAN

Mailing Address 302 TUSCANY CT

City State Zip Code
RIDGELAND MS 39157-9426

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946569

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 170.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 566 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CECIL DRINKWARD

Mailing Address 01920 SW GREENWOOD DRIVE

City State Zip Code
PORTLAND OR 97219-8366

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOFFMAN CONSTRUCTION PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957916

Amount of Each Receipt this Period
3000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SALLY DRINKWARD

Mailing Address 01920 SW GREENWOOD RD.

City State Zip Code
PORTLAND OR 97219-8366

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 1 0

Transaction ID: SA11.13947669

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM F. DRIPPS

Mailing Address 1404 32ND. ST.

City State Zip Code
LAUREL MS 39440-1415

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963528

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **4100.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 567 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM F. DRIPPS

Mailing Address 1404 32ND. ST.

City LAUREL State MS Zip Code 39440-1415

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt MM / DD / YYYY
11 / 08 / 2010

Transaction ID: SA11.13966585

Amount of Each Receipt this Period 100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MARY ELLEN DRISCOLL

Mailing Address P.O. BOX F

City WELLMAN State IA Zip Code 52356-0475

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PICTURE FRAMER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 272.00

Date of Receipt MM / DD / YYYY
10 / 14 / 2010

Transaction ID: SA11.13918795

Amount of Each Receipt this Period 15.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. MARY ELLEN DRISCOLL

Mailing Address P.O. BOX F

City WELLMAN State IA Zip Code 52356-0475

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PICTURE FRAMER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 272.00

Date of Receipt MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13934620

Amount of Each Receipt this Period 20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 135.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 568 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. MARY ELLEN DRISCOLL

Mailing Address P.O. BOX F

City State Zip Code
WELLMAN IA 52356-0475

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PICTURE FRAMER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 272.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13935965
Amount of Each Receipt this Period: 1.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MARY ELLEN DRISCOLL

Mailing Address P.O. BOX F

City State Zip Code
WELLMAN IA 52356-0475

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PICTURE FRAMER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 272.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13950347
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL J. DRISCOLL

Mailing Address 4552 FABLE RD. CT. N

City State Zip Code
HUGO MN 55038-3315

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13944457
Amount of Each Receipt this Period: 200.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 226.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 569 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. THOMAS L. DRISCOLL

Mailing Address 4815 CANNONBURG ROAD NE

City State Zip Code
BELMONT MI 49306-9614

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13929055
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAVID DRUCKREY

Mailing Address 600 W MADISON ST

City State Zip Code
SPRING GREEN WI 53588-9264

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UNEMPLOYED UNEMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13932117
Amount of Each Receipt this Period: 75.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GERARD J. DSOUZA

Mailing Address 1610 HUNTERS GLEN CT.

City State Zip Code
WHEATON IL 60189-7464

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13943380
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 200.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 570 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. HONG DU

Mailing Address 21180 CANYON VIEW DR

City State Zip Code
SARATOGA CA 95070-5764

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955911

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. MARGARET O. DU PONT

Mailing Address 415 CAMINO REAL AVE

City State Zip Code
EL PASO TX 79922-2003

FEC ID number of contributing federal political committee. **C**

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13965006

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
JOHN DUARTE

Mailing Address
6706 DUSTY LANE

City State Zip Code
MODESTO CA 95357

FEC ID number of contributing federal political committee. **C**

Name of Employer
DUARTE GEORGETOWN VINEYAR-
DS

Occupation
OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1080.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11A.13977529

Amount of Each Receipt this Period

1080.00

IN-KIND CONTRIBUTION

IN-KIND: BEVERAGE

SUBTOTAL of Receipts This Page (optional)

1390.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 571 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. ELLEN G. DUBIAK

Mailing Address 7300 20TH ST LOT 443

City State Zip Code
VERO BEACH FL 32966-8811

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13947865

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. GAIL DUBOIS

Mailing Address 268 S MAPLE DR

City State Zip Code
BEVERLY HILLS CA 90212-4014

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TELEFLORA, INC. LLC ACTUARY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931608

Amount of Each Receipt this Period
235.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. LANITA J. DUCKWORTH

Mailing Address 5062 SCR 99

City State Zip Code
BAY SPRINGS MS 39422-9246

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13971605

Amount of Each Receipt this Period
75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **350.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 572 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. HOWARD DUDDING

Mailing Address 103 CATTLE TRAIL WAY

City State Zip Code
GEORGETOWN TX 78633-4562

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Transaction ID: SA11.13968222

Amount of Each Receipt this Period
60.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. STERLING M. DUDLEY

Mailing Address 4830 GLADE CHAPEL RD

City State Zip Code
HILLSBORO MO 63050-1920

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 331.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932795

Amount of Each Receipt this Period
51.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DONALD B. DUFFEY

Mailing Address 725 MEMORIAL PKWY NW

City State Zip Code
HUNTSVILLE AL 35801-5829

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ALABAMA BUSINESS FORMS INC SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946681

Amount of Each Receipt this Period
300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **411.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 573 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MICHAEL DUFFEY

Mailing Address 601 PENNSYLVANIA AVE NW

City State Zip Code
WASHINGTON DC 20004-2601

FEC ID number of contributing federal political committee. **C**

Name of Employer SSCI Occupation GOVERNMENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 11 / 02 / 2010
Transaction ID: SA11.13962851
Amount of Each Receipt this Period: 300.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JUDITH C. DUFFIE

Mailing Address 13224 CHESTNUT OAK DRIVE

City State Zip Code
GAITHERSBURG MD 20878-3553

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13948890
Amount of Each Receipt this Period: 200.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM DUFFY

Mailing Address 5890 38TH AVE N APT 101A

City State Zip Code
SAINT PETERSBURG FL 33710-1955

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 311.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13934733
Amount of Each Receipt this Period: 15.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 515.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 574 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. WILLIAM DUFFY

Mailing Address 5890 38TH AVE N APT 101A

City	State	Zip Code
SAINT PETERSBURG	FL	33710-1955

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 311.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943604

Amount of Each Receipt this Period

10.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. WILLIAM DUFFY

Mailing Address 5890 38TH AVE N APT 101A

City	State	Zip Code
SAINT PETERSBURG	FL	33710-1955

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 311.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954820

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. WILLIAM DUFFY

Mailing Address 5890 38TH AVE N APT 101A

City	State	Zip Code
SAINT PETERSBURG	FL	33710-1955

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 311.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13971243

Amount of Each Receipt this Period

10.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

45.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 575 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. COLLEEN R. DUKE
 Mailing Address 2008 COUNTY ROAD 137
 City State Zip Code
 SNYDER TX 79549-8748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HOMEMAKER HOMEMAKER
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 265.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 5 / 2 0 1 0
Transaction ID: SA11.13955116
 Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MARK J. DUMMANN
 Mailing Address 1661 1ST AVE
 City State Zip Code
 GRAFTON WI 53024-2252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 EARTH TECH CIVIL ENGINEER
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 385.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 1 / 2 0 1 0
Transaction ID: SA11.13942529
 Amount of Each Receipt this Period
 35.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. DEASON DUNAGAN
 Mailing Address 303 WILLIAMS AVE SW
 SUITE 1421
 City State Zip Code
 HUNTSVILLE AL 35801-6008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFORTS M.D.
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 8 / 2 0 1 0
Transaction ID: SA11.13960167
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1085.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 576 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES R. DUNATHAN

Mailing Address 142 OLD VINE WAY

City State Zip Code
NAPA CA 94558-7029

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 11 / 19 / 2010
Transaction ID: SA11.13972096
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BRIAN G. DUNCAN

Mailing Address 117 E KINGSMILL AVE

City State Zip Code
PAMPA TX 79065-6549

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation INSURANCE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13934634
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
J DUNCAN

Mailing Address P.O. BOX 523

City State Zip Code
LOXLEY AL 36551-0523

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13957046
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 200.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 577 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. JEANEANE B. DUNCAN

Mailing Address 306 SHADYWOOD RD

City State Zip Code
HOUSTON TX 77057-1315

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED INVESTOR

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 310.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 1 0

Transaction ID: SA11.13972100

Amount of Each Receipt this Period

75.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
JOHN DUNCAN

Mailing Address 3131 TENNYSON ST. NW

City State Zip Code
WASHINGTON DC 20015-2359

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MERIDIAN RESEARCH GROUP POLICY ANALYST

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959394

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
JOHN DUNCAN

Mailing Address 3131 TENNYSON ST. NW

City State Zip Code
WASHINGTON DC 20015-2359

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MERIDIAN RESEARCH GROUP POLICY ANALYST

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 1 0

Transaction ID: SA11.13966559

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

525.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 578 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MR. PEYTON E. DUNCAN</p> <p>Mailing Address 8209 LORTON RD</p> <p>City State Zip Code LORTON VA 22079-2704</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 310.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 1 0</p> <p>Transaction ID: SA11.13957671</p> <p>Amount of Each Receipt this Period 110.00</p> <p>CONTRIBUTION</p>
---	--

<p>B. Full Name (Last, First, Middle Initial) MR. ROBERT M. DUNCAN</p> <p>Mailing Address 6664 DELICIOUS CT</p> <p>City State Zip Code RIVERDALE GA 30274-2804</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 251.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 1 0</p> <p>Transaction ID: SA11.13944225</p> <p>Amount of Each Receipt this Period 25.00</p> <p>CONTRIBUTION</p>
---	---

<p>C. Full Name (Last, First, Middle Initial) THOMAS LELON DUNCAN</p> <p>Mailing Address 119 LEWALD DR</p> <p>City State Zip Code HOUMA LA 70360-7325</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer THOMAS L DUNCAN Occupation PETROLEUM INDUSTRY</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 541.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 1 0</p> <p>Transaction ID: SA11.13966269</p> <p>Amount of Each Receipt this Period 200.00</p> <p>CONTRIBUTION</p>
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SUBTOTAL of Receipts This Page (optional)	335.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 579 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOEL G. DUNCKLEE

Mailing Address 22 WESTMINSTER DR.

City State Zip Code
MARLBOROUGH MA 01752-3679

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959749

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ELLIS M. DUNKUM

Mailing Address 9800 ST. JULIANS LANE

City State Zip Code
RICHMOND VA 23238-5910

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934169

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. BERNARD J. DUNLEVY, SR.

Mailing Address 672 MESHACH LANE

City State Zip Code
HEATHSVILLE VA 22473-4719

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LIVELY DRUG PHARMACIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13932270

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 400.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 580 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. MIKE M. DUNN

Mailing Address P.O. BOX 1427

City State Zip Code
HILLTOP LAKES TX 77871-1427

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MELT SOLUTIONS LLC BUSINESS OWNER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 601.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933059

Amount of Each Receipt this Period

351.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

THOMAS DUNN

Mailing Address 26 NORTH STREET

City State Zip Code
GREENWICH CT 06830-4726

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CRAVATH, SWAINE & MOORE ATTORNEY

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 750.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 1 0

Transaction ID: SA11.13928697

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. VIRGINIA S. DUNN

Mailing Address 2341 ONE IRON DRIVE

City State Zip Code
YORK SC 29745-7753

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 1 0

Transaction ID: SA11.13972050

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1001.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 581 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. EDITH A. DUNNE

Mailing Address 484 CEDAR ST.

City State Zip Code
WINNETKA IL 60093-2659

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
201.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941455

Amount of Each Receipt this Period

101.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JOHN A. DUPPS

Mailing Address 4968 TIMBERLINE DR.

City State Zip Code
MIDDLETOWN OH 45042-4003

FEC ID number of contributing federal political committee. **C**

Name of Employer
THE DUPPS CO.

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
EXEC.

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 1 0

Transaction ID: SA11.13966522

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. KIM R. DUPREY

Mailing Address 5200 S SUNDOWNER AVE

City State Zip Code
SIOUX FALLS SD 57106-2542

FEC ID number of contributing federal political committee. **C**

Name of Employer
HOLMES MURPHY

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
INSURANCE AGENT

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13960627

Amount of Each Receipt this Period

20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

221.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 582 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
SALLY A. DURANT
Mailing Address 2855 VILLAGE DR
City ZANESVILLE State OH Zip Code 43701-0902
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13932105
Amount of Each Receipt this Period 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RICHARD J. DURAVA
Mailing Address 611 W NOYES ST
City ARLINGTON HTS State IL Zip Code 60005-3643
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 252.00
Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13941518
Amount of Each Receipt this Period 101.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. LEON DURBIN
Mailing Address 526 ADAMS ST
City SAN ANTONIO State TX Zip Code 78210-1268
FEC ID number of contributing federal political committee. **C**
Name of Employer HABITAT FOR HUMANITY Occupation PART-TIME HOUSE LEAD
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 266.00
Date of Receipt 10 / 14 / 2010
Transaction ID: SA11.13930555
Amount of Each Receipt this Period 35.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 186.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 583 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM J. DURRANT

Mailing Address 4418 BEDFORD DRIVE

City State Zip Code
PROVO UT 84604-5361

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 670.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934698

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DEAN R. DUSKIN

Mailing Address 5437 GREENWOOD DR

City State Zip Code
CLEVELAND TX 77328-9409

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918646

Amount of Each Receipt this Period
80.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DENNIS E. DUVALL

Mailing Address 11183 KADOTA AVE APT B

City State Zip Code
POMONA CA 91766-3948

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PROPERTY MANAGEMENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 530.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954057

Amount of Each Receipt this Period
150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **270.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 584 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. JEANNETTE DYER

Mailing Address 13464 RONNIE WAY

City State Zip Code
SARATOGA CA 95070-5166

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939917

Amount of Each Receipt this Period
75.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. NANCY S. DYSART

Mailing Address 217 SAINT MATTHEWS AVE

City State Zip Code
LOUISVILLE KY 40207-2039

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED REALTY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940878

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. NANCY S. DYSART

Mailing Address 217 SAINT MATTHEWS AVE

City State Zip Code
LOUISVILLE KY 40207-2039

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED REALTY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940937

Amount of Each Receipt this Period
10.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **110.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 585 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. NANCY S. DYSART

Mailing Address 217 SAINT MATTHEWS AVE

City State Zip Code
LOUISVILLE KY 40207-2039

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED REALTY

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950364

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. NANCY S. DYSART

Mailing Address 217 SAINT MATTHEWS AVE

City State Zip Code
LOUISVILLE KY 40207-2039

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED REALTY

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 4 / 2 0 1 0

Transaction ID: SA11.13965659

Amount of Each Receipt this Period

10.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. RALPH J. EADS

Mailing Address 2413 STANMORE DR

City State Zip Code
HOUSTON TX 77019-3423

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938459

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

135.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 586 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROOSEVELT EADY

Mailing Address 1436 BEL AIR DRIVE

City State Zip Code
SAVANNAH GA 31415-7804

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942567

Amount of Each Receipt this Period
45.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAVID A. EAGLESON

Mailing Address 138 17TH AVENUE S.

City State Zip Code
NAPLES FL 34102-7403

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957376

Amount of Each Receipt this Period
20.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PRESTON N. EAMES

Mailing Address 65 TUCKER MOUNTAIN RD.

City State Zip Code
MEREDITH NH 03253-4824

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929520

Amount of Each Receipt this Period
60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **125.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 587 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. PRESTON N. EAMES

Mailing Address 65 TUCKER MOUNTAIN RD.

City State Zip Code
MEREDITH NH 03253-4824

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 255.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13965240

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. PRESTON N. EAMES

Mailing Address 65 TUCKER MOUNTAIN RD.

City State Zip Code
MEREDITH NH 03253-4824

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 255.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13965241

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
KRISTEN EASTLICK

Mailing Address 1708 WEST ABINGDON DRIVE

City State Zip Code
ALEXANDRIA VA 22314-1026

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BERMAN AND COMPANY CHIEF ADMINISTRATIVE OFFICER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928513

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

350.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 588 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT L. EASTMAN

Mailing Address 720 MAPLE ST

City State Zip Code
BURKBURNETT TX 76354-2760

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 851.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932535

Amount of Each Receipt this Period
251.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RANDALL D. EASTWOOD

Mailing Address 15612 L ST

City State Zip Code
OMAHA NE 68135-1106

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CBS HOME MORTGAGE MORTGAGE LOAN OFFICER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951577

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. BERTHA A. EATON

Mailing Address P.O. BOX 158

City State Zip Code
SUTTON MA 01590-0158

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED RETAIL STORE OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 271.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934119

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 351.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 589 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DAROLD E. EATON

Mailing Address 4718 GUNBARREL PL

City State Zip Code
GRAND ISLAND NE 68801-8504

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 221.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948496

Amount of Each Receipt this Period
101.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. GLENNA J. EATON

Mailing Address 2613 BILLINGS RD.

City State Zip Code
HEPHZIBAH GA 30815-6510

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 271.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943856

Amount of Each Receipt this Period
31.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. GLENNA J. EATON

Mailing Address 2613 BILLINGS RD.

City State Zip Code
HEPHZIBAH GA 30815-6510

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 271.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954555

Amount of Each Receipt this Period
20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 152.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 590 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
HAROLD K. EATON

Mailing Address 1755 MILLHOUSE RUN

City State Zip Code
MARIETTA GA 30066-8009

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2010

Transaction ID: SA11.13964656

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN E. EATWELL

Mailing Address 14198 N 91ST AVE W

City State Zip Code
MINGO IA 50168-8563

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13960786

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. KATHLEEN M. EBBERT

Mailing Address 506 NOB HILL DR

City State Zip Code
PERKASIE PA 18944-1281

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 309.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13935257

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 250.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 591 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. ARTHUR EBERLY

Mailing Address 202 CHAMBERLAIN CT

City GREENVILLE State SC Zip Code 29605-3161

FEC ID number of contributing federal political committee. **C**

Name of Employer CAROLINA CARDIOLOGY Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 10 / 28 / 2010
Transaction ID: SA11.13957682
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ALICE EBLE

Mailing Address P.O. BOX 273

City ANGOLA State IN Zip Code 46703-0273

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13933349
Amount of Each Receipt this Period: 101.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GEORGE EBY

Mailing Address 2965 JOHNSTONVILLE RD SPC 90

City SUSANVILLE State CA Zip Code 96130-4747

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 355.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13937472
Amount of Each Receipt this Period: 20.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 221.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 592 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. MYRNA ECHOLS

Mailing Address 6361 WATERDRAGON AVE

City State Zip Code
LAS VEGAS NV 89110-2883

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933534

Amount of Each Receipt this Period

90.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. FREDERICK A. ECK

Mailing Address 215 WEST MADISON AVENUE

City State Zip Code
WHEATON IL 60187-4120

FEC ID number of contributing federal political committee. **C**

Name of Employer
THE RANDOLPH GROUP, INC.

Occupation

PRIVATE EQUITY INVESTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 5 / 2 0 1 0

Transaction ID: SA11.13966048

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MICHELLE MURRAY ECKERT

Mailing Address 13160 SUNSET POINT

City State Zip Code
NEW BUFFALO MI 49117-8809

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940895

Amount of Each Receipt this Period

120.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5210.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES ECKFORD

Mailing Address 122 SUMMER BAY DR

City State Zip Code
RIDGELAND MS 39157-9209

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
10 / 29 / 2010

Transaction ID: SA11.13962198

Amount of Each Receipt this Period
75.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. PHYLLIS N. EDDINS

Mailing Address 5307 ALVIE ST.

City State Zip Code
NORTH CHARLESTON SC 29418-5801

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 515.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13942017

Amount of Each Receipt this Period
45.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. EDWARD L. EDEN

Mailing Address P.O. BOX 20194

City State Zip Code
COLORADO CITY CO 81019-2194

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt
MM / DD / YYYY
11 / 05 / 2010

Transaction ID: SA11.13966257

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **170.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 594 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. CHRISTINE EDERA

Mailing Address 5507 LODGE CREEK DR

City HOUSTON State TX Zip Code 77066-2421

FEC ID number of contributing federal political committee. **C**

Name of Employer GREATER HOUSTON ANESTHESIOLOGY Occupation ANESTHETIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13948924
Amount of Each Receipt this Period: 30.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. LOIS STILES EDGERLY

Mailing Address 32 HIGHLAND ST.

City CAMBRIDGE State MA Zip Code 02138-2210

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 555.00

Date of Receipt: 10 / 28 / 2010
Transaction ID: SA11.13957695
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. BARBARA EDGEWORTH

Mailing Address 3703 E CHAUDION CT

City BLOOMINGTON State IN Zip Code 47401-4465

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 11 / 12 / 2010
Transaction ID: SA11.13968216
Amount of Each Receipt this Period: 75.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 205.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 595 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
HELEN EDGINGTON

Mailing Address P.O. BOX 26

City State Zip Code
CHAUTAUQUA NY 14722-0026

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
HOTEL OWNER

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954229

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
JERALDINE F. EDISON

Mailing Address 9843 E 84TH ST

City State Zip Code
TULSA OK 74133-4507

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943477

Amount of Each Receipt this Period

35.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
ROBERTA J. EDLER

Mailing Address P.O. BOX 21

City State Zip Code
CEDARVILLE IL 61013-0021

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955275

Amount of Each Receipt this Period

60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

295.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 596 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM D. EDMAN

Mailing Address 83 PROMENADE ST. N

City State Zip Code
MONTGOMERY TX 77356-8300

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1800.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950165

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. CHARLOTTE EDMUNDS

Mailing Address 13090 SOUTHAMPTON DR

City State Zip Code
BONITA SPGS FL 34135-3405

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 241.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946743

Amount of Each Receipt this Period
101.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ERNEST EDMUNDSON

Mailing Address 4814 WALMSLEY AVE

City State Zip Code
NEW ORLEANS LA 70125-3526

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED INVESTOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 1 0

Transaction ID: SA11.13967961

Amount of Each Receipt this Period
125.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 726.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 597 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. JOAN M. EDSON

Mailing Address P.O. BOX 145

City HUDSONVILLE State MI Zip Code 49426-0145

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13947759
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. ELIZABETH B. EDWARDS

Mailing Address 3751 RICE BLVD

City HOUSTON State TX Zip Code 77005-2823

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13946465
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ELMO E. EDWARDS

Mailing Address 1101 MALLARD DR

City DEL CITY State OK Zip Code 73115-2340

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 406.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13945981
Amount of Each Receipt this Period: 30.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 105.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 598 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ELMO E. EDWARDS

Mailing Address 1101 MALLARD DR

City State Zip Code
DEL CITY OK 73115-2340

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
406.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953599

Amount of Each Receipt this Period
31.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. KENNETH L. EDWARDS

Mailing Address 2201 ROCKWELL RD.

City State Zip Code
RIVERSIDE CA 92506-5525

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953365

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. KENNETH L. EDWARDS

Mailing Address 2201 ROCKWELL RD.

City State Zip Code
RIVERSIDE CA 92506-5525

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954351

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **331.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 599 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. KENNETH L. EDWARDS	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 2201 ROCKWELL RD.	Transaction ID: SA11.13960548
	City State Zip Code RIVERSIDE CA 92506-5525	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

B.	Full Name (Last, First, Middle Initial) MS. MAGGIE A. EDWARDS	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 1620 VILLAGE CT	Transaction ID: SA11.13950496
	City State Zip Code EVANSVILLE IN 47725-8933	Amount of Each Receipt this Period 105.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

C.	Full Name (Last, First, Middle Initial) DR. REX EDWARDS	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 404 S SPRUCE ST	Transaction ID: SA11.13928842
	City State Zip Code CLARKSVILLE TX 75426-3590	Amount of Each Receipt this Period 410.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1020.00	

SUBTOTAL of Receipts This Page (optional)	▶	615.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 600 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT A. EDWARDS

Mailing Address 249 MARION DRIVE

City State Zip Code
MOUNT AIRY NC 27030-8659

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 292.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918825

Amount of Each Receipt this Period
75.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT A. EDWARDS

Mailing Address 249 MARION DRIVE

City State Zip Code
MOUNT AIRY NC 27030-8659

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 292.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935095

Amount of Each Receipt this Period
30.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT A. EDWARDS

Mailing Address 249 MARION DRIVE

City State Zip Code
MOUNT AIRY NC 27030-8659

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 292.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943104

Amount of Each Receipt this Period
30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **135.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 601 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM R. EGBERT

Mailing Address 1660 RUTHERFORD RIDGE RD.

City OGDEN State UT Zip Code 84403-4400

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 351.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13945679
 Amount of Each Receipt this Period: 1.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM R. EGBERT

Mailing Address 1660 RUTHERFORD RIDGE RD.

City OGDEN State UT Zip Code 84403-4400

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 351.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13946833
 Amount of Each Receipt this Period: 150.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOHN M. EGLE

Mailing Address 112 E PECK BLVD.

City LAFAYETTE State LA Zip Code 70508-7472

FEC ID number of contributing federal political committee. **C**

Name of Employer HUB CITY INDUSTRIES LLC Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13944325
 Amount of Each Receipt this Period: 100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 251.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 602 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ROBERT JACK EGLY

Mailing Address 2681 CAMERON PARK DR. SPC 90

City State Zip Code
CAMERON PARK CA 95682-8840

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
FREDERICKSON TRUCK LINES HEAVY TRUCK MECHANIC

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 435.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959813

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. WILLAM A. EHLERS

Mailing Address P.O. BOX 3003

City State Zip Code
OLYMPIA WA 98509-3003

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 310.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955111

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CARL EICHENBERGER

Mailing Address P.O. BOX 579

City State Zip Code
SALEM MO 65560-0579

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
TOWN & COUNTRY BANK BANKER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13958223

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 1090.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 603 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. THOMAS E. EICHHORST

Mailing Address 5228 CREIGHTON DR

City State Zip Code
SAINT LOUIS MO 63123-1706

FEC ID number of contributing federal political committee. **C**

Name of Employer LEADERSHIP NETWORK Occupation ADMINISTRATION

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935645

Amount of Each Receipt this Period
225.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DORIS C. EICHORN

Mailing Address 7006 HOLYROOD DR.

City State Zip Code
MC LEAN VA 22101-1552

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953598

Amount of Each Receipt this Period
51.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT E. EIDSON

Mailing Address 1801 JACK FROST ROAD

City State Zip Code
VIRGINIA BEACH VA 23455-2508

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934166

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **376.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 604 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial) ALBERT EIKMEIER		Date of Receipt MM / DD / YYYY 10 / 14 / 2010
Mailing Address 1930 OCONNELL AVE		Transaction ID: SA11.13930259
City SAINT LOUIS	State MO	Zip Code 63114-2415
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 26.00
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 226.00	

B.

Full Name (Last, First, Middle Initial) MR. ALAN EISENBERG		Date of Receipt MM / DD / YYYY 10 / 29 / 2010
Mailing Address 1201 MARYLANE AVE., SW SUITE 900		Transaction ID: SA11.13959389
City WASHINGTON	State DC	Zip Code 20024-6129
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer BIOTECHNOLOGY INDUSTRY OR- GANIZATION	Occupation EXECUTIVE VICE PRESIDENT	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1350.00	

C.

Full Name (Last, First, Middle Initial) DR. ALAIN ELBAZ		Date of Receipt MM / DD / YYYY 10 / 28 / 2010
Mailing Address 5412 PINE STREET		Transaction ID: SA11.13958240
City BELLAIRE	State TX	Zip Code 77401-4707
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional)	▶	2676.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 605 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ROBERT L. ELDER		Date of Receipt
	Mailing Address 310 W 8TH ST		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	LEADVILLE	CO	80461-3532
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer RETIRED		Occupation RETIRED	Transaction ID: SA11.13939937
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="290.00"/>	<input type="text" value="40.00"/>
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) DR. STEPHEN J. ELDER		Date of Receipt
	Mailing Address 58 CHAPMAN LOOP		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	STEILACOOM	WA	98388-1731
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer TACOMA ANESTHESIA ASSOCIAT-ES		Occupation PHYSICIAN	Transaction ID: SA11.13941759
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="150.00"/>
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) MRS. MARGARET ELDRED		Date of Receipt
	Mailing Address 4186 17 MILE RD. NE		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	CEDAR SPRINGS	MI	49319-9451
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13937061
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="227.00"/>	<input type="text" value="25.00"/>
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="215.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 606 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
ARNE H. ELIASSON

Mailing Address 3152 GRACEFIELD RD. APT. 219

City State Zip Code
SILVER SPRING MD 20904-5899

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949200

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
NANCY ELKAN

Mailing Address 3731 SHADE TREE TERRACE

City State Zip Code
PORTAGE MI 49024-1036

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2378.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13943003

Amount of Each Receipt this Period
199.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. PHYLLIS D. ELLARD

Mailing Address 3525 LYNNGATE CIR

City State Zip Code
BIRMINGHAM AL 35216-5239

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 211.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963445

Amount of Each Receipt this Period
21.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **470.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 607 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JAMES W. ELLENDER
Mailing Address 6901 HWY. 27 S
City State Zip Code
SULPHUR LA 70665-7753
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
RETIRED RETIRED
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 560.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0
Transaction ID: SA11.13943577
Amount of Each Receipt this Period
120.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RICKY ELLINGSON
Mailing Address 2740 W OLIVE AVE SPC 103
City State Zip Code
FRESNO CA 93728-2457
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
RETIRED RETIRED
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 335.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0
Transaction ID: SA11.13940986
Amount of Each Receipt this Period
20.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RICKY ELLINGSON
Mailing Address 2740 W OLIVE AVE SPC 103
City State Zip Code
FRESNO CA 93728-2457
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
RETIRED RETIRED
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 335.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0
Transaction ID: SA11.13944537
Amount of Each Receipt this Period
15.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 155.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 608 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. ALEXANDRA ELLIOTT

Mailing Address 2975 E WESLEY AVE

City State Zip Code
DENVER CO 80210-5551

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931854

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAVID F. ELLIOTT, M.D.

Mailing Address 5050 SE 14TH PL

City State Zip Code
OCALA FL 34471-3328

FEC ID number of contributing federal political committee. **C**

Name of Employer
HOSPICE OF MARION CO.

Occupation
PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
301.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939068

Amount of Each Receipt this Period
1.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID F. ELLIOTT, M.D.

Mailing Address 5050 SE 14TH PL

City State Zip Code
OCALA FL 34471-3328

FEC ID number of contributing federal political committee. **C**

Name of Employer
HOSPICE OF MARION CO.

Occupation
PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
301.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13960230

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **551.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 610 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. JACQUELINE ELLIOT
Mailing Address 53 CUBA AVE

City State Zip Code
STATEN ISLAND NY 10306-4907

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955630
Amount of Each Receipt this Period 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MICHAEL B. ELLIOTT
Mailing Address 1323 ASHLAND AVE

City State Zip Code
WILMETTE IL 60091-1607

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928854
Amount of Each Receipt this Period 250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT MARTIN ELLIOT
Mailing Address 3138 HIGHLAND VIEW DR.

City State Zip Code
BURBANK CA 91504-1613

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
C&W LOUNGES, INC. SMALL BUSINESS OWNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 550.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928660
Amount of Each Receipt this Period 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **350.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 611 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DR. DANIEL C. ELLISON

Mailing Address 7785 N STATE ST
SUITE 230

City State Zip Code
LOWVILLE NY 13367

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LEWIS CTY GEN HOSPITAL SURGEON

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955008

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. DEANNA M. ELLIS

Mailing Address 414 SHADYBROOK DR

City State Zip Code
SPRING CREEK NV 89815-5529

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931648

Amount of Each Receipt this Period

35.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. DENNIS ELLIS

Mailing Address 5102 HOWARD LN

City State Zip Code
NAMPA ID 83687-8659

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 1 0

Transaction ID: SA11.13947639

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

260.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 612 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. DENNIS ELLIS	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 5102 HOWARD LN	Transaction ID: SA11.13957897
	City State Zip Code NAMPA ID 83687-8659	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

B.	Full Name (Last, First, Middle Initial) MR. DENNIS ELLIS	Date of Receipt MM / DD / YYYY 10 / 31 / 2010
	Mailing Address 5102 HOWARD LN	Transaction ID: SA11.13960683
	City State Zip Code NAMPA ID 83687-8659	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

C.	Full Name (Last, First, Middle Initial) MR. GARY ELLISON	Date of Receipt MM / DD / YYYY 11 / 04 / 2010
	Mailing Address 11767 KATY FWY SUITE 1112	Transaction ID: SA11.13965633
	City State Zip Code HOUSTON TX 77079-1731	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	150.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 613 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JOYCE ELLIS
Mailing Address 747 COUNTY ROAD 2506
City ALTO State TX Zip Code 75925-4409
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00
Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13941905
Amount of Each Receipt this Period 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. KENNETH C. ELLISON
Mailing Address 4500 S GARNETT RD
City TULSA State OK Zip Code 74146-5229
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation LAWYER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00
Date of Receipt 10 / 29 / 2010
Transaction ID: SA11.13959148
Amount of Each Receipt this Period 200.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MISS MAXINE J. ELLISON
Mailing Address 14256 JENNINGS VISTA CT.
City LAKESIDE State CA Zip Code 92040-5834
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 211.00
Date of Receipt 11 / 16 / 2010
Transaction ID: SA11.13969269
Amount of Each Receipt this Period 30.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 280.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 614 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT P. ELLIS

Mailing Address 3728 AMHERST AVE

City State Zip Code
LORAIN OH 44052-5363

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WICKENS HERZER & PANZA CO. LAWYER
LPA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
11 / 13 / 2010

Transaction ID: SA11.13967834

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ROSE ELLISON

Mailing Address 2665 NW VAN PELT BLVD. APT. 17

City State Zip Code
ROSEBURG OR 97471-1255

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 551.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13953881

Amount of Each Receipt this Period
150.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ROSE ELLISON

Mailing Address 2665 NW VAN PELT BLVD. APT. 17

City State Zip Code
ROSEBURG OR 97471-1255

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 551.00

Date of Receipt
MM / DD / YYYY
11 / 16 / 2010

Transaction ID: SA11.13969286

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 500.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 615 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
SHIRLEY ELLIS
Mailing Address 2209 FOREST CIR
City NORMAN State OK Zip Code 73069-6420
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 310.00
Date of Receipt 10 / 25 / 2010
Transaction ID: SA11.13947785
Amount of Each Receipt this Period 110.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MARVIN ELMORE
Mailing Address 4018 E. 1000TH AVENUE
City WHEELER State IL Zip Code 62479-2525
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00
Date of Receipt 11 / 10 / 2010
Transaction ID: SA11.13967666
Amount of Each Receipt this Period 50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN T. ELSEY
Mailing Address 266 CRESTWOOD AVE
City YONKERS State NY Zip Code 10707-2214
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00
Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13931894
Amount of Each Receipt this Period 75.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 235.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 616 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JOHN R. EMERSON

Mailing Address 5536 MONTEMALAGA DR

City RANCHO PALOS VERDE State CA Zip Code 90275-1743

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13952644
 Amount of Each Receipt this Period: 100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LESTER W. EMERY

Mailing Address P.O. BOX 313

City MISSION State SD Zip Code 57555-0313

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 247.00

Date of Receipt: 11 / 22 / 2010
Transaction ID: SA11.13973197
 Amount of Each Receipt this Period: 20.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. JANE L. EMISON

Mailing Address 3340 HILL LN.

City WAYZATA State MN Zip Code 55391-2602

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED
Occupation SELF-EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 601.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13935919
 Amount of Each Receipt this Period: 1.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 121.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 617 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MARGARET E. EMMONS
Mailing Address 17 LAUREN LN.
City BRICK State NJ Zip Code 08723-7838
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 560.00
Date of Receipt 10 / 20 / 2010
Transaction ID: SA11.13943503
Amount of Each Receipt this Period 25.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MARGARET E. EMMONS
Mailing Address 17 LAUREN LN.
City BRICK State NJ Zip Code 08723-7838
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 560.00
Date of Receipt 10 / 21 / 2010
Transaction ID: SA11.13946618
Amount of Each Receipt this Period 80.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MARGARET E. EMMONS
Mailing Address 17 LAUREN LN.
City BRICK State NJ Zip Code 08723-7838
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 560.00
Date of Receipt 10 / 25 / 2010
Transaction ID: SA11.13952673
Amount of Each Receipt this Period 25.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 130.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 618 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. GLEN EMRICK

Mailing Address 7998 BLACKMAN RD

City State Zip Code
JACKSON MI 49201-7446

FEC ID number of contributing federal political committee. **C**

Name of Employer
HALLMARK CERAMIC LABORATORY

Occupation
PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 18 / 2010

Transaction ID: SA11.13969750

Amount of Each Receipt this Period

310.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. HELEN J. EMRICH

Mailing Address 88 MASONIC HOME RD APT R400

City State Zip Code
CHARLTON MA 01507-3305

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 19 / 2010

Transaction ID: SA11.13931627

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DERONDA ENGBRETSON

Mailing Address N78W17343 WILDWOOD DR APT 535

City State Zip Code
MENOMONEE FALLS WI 53051-4169

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 20 / 2010

Transaction ID: SA11.13943770

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

445.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 619 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CHARLES J. ENGELMAN

Mailing Address 961 CLARELLEN DR

City State Zip Code
FORT MYERS FL 33919-6006

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13931177

Amount of Each Receipt this Period
1.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. EDWARD ENGELMANN

Mailing Address 246 SADDLE RIVER RD

City State Zip Code
AIRMONT NY 10952-4610

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937246

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
FIDELIS ENGEL, JR.

Mailing Address 755 260TH AVE

City State Zip Code
HAYS KS 67601-9532

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED FARMER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 261.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952529

Amount of Each Receipt this Period
1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 27.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 620 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GAY ENGELBERGER

Mailing Address 109 TAUNTON HILL RD.

City State Zip Code
NEWTOWN CT 06470-1794

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt
MM / DD / YYYY
11 / 15 / 2010

Transaction ID: SA11.13968843

Amount of Each Receipt this Period
150.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. OTTO R. ENGER

Mailing Address 725 9TH AVE APT 2306

City State Zip Code
SEATTLE WA 98104-2082

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
399.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13946495

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. OTTO R. ENGER

Mailing Address 725 9TH AVE APT 2306

City State Zip Code
SEATTLE WA 98104-2082

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
399.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13949180

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **230.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 621 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. OTTO R. ENGER

Mailing Address 725 9TH AVE APT 2306

City State Zip Code
SEATTLE WA 98104-2082

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 399.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949340

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. R. WILLARD ENGLAND

Mailing Address 10802 N 5750 W

City State Zip Code
HIGHLAND UT 84003-9035

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
3M RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961412

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DONALD R. ENGLE

Mailing Address 6714 GOUTHIER ROAD

City State Zip Code
FALLS CHURCH VA 22042-2707

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 395.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946630

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 190.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 622 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DONALD R. ENGLE

Mailing Address 6714 GOUTHIER ROAD

City State Zip Code
FALLS CHURCH VA 22042-2707

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 395.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13947294

Amount of Each Receipt this Period
30.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DONALD R. ENGLE

Mailing Address 6714 GOUTHIER ROAD

City State Zip Code
FALLS CHURCH VA 22042-2707

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 395.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963728

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. DOROTHY E. ENGLER

Mailing Address 250 PANTOPS MT RD.
APT 5236

City State Zip Code
CHARLOTTESVILLE VA 22911-8703

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 430.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931634

Amount of Each Receipt this Period
110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 165.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 623 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ROLAND E. ENGLISH

Mailing Address 11251 OAKCENTER DR

City State Zip Code
HOUSTON TX 77072-1966

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949776

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROY R. ENGLISH

Mailing Address 2821 LAS VEGAS TRAIL APT 69

City State Zip Code
FORT WORTH TX 76116-3117

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
OIL INFO LBY OF FT WORTH DATA MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13945166

Amount of Each Receipt this Period
15.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROY R. ENGLISH

Mailing Address 2821 LAS VEGAS TRAIL APT 69

City State Zip Code
FORT WORTH TX 76116-3117

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
OIL INFO LBY OF FT WORTH DATA MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957084

Amount of Each Receipt this Period
20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **60.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 624 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
VICKI ENGMAN

Mailing Address 568 PINON ROAD

City State Zip Code
PINON HILLS CA 92372

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 535.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928472

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JOSEPH E. ENOS

Mailing Address 730 COHANNET ST

City State Zip Code
TAUNTON MA 02780-4723

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ENOS METALS SCRAP METAL DEALER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 580.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931932

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. DOUGLAS F. ENTENMAN

Mailing Address 1240 EAGLEVILLE ROAD

City State Zip Code
FOSTORIA OH 44830-9750

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
C.L. DEEMER ROOFING AND SHEET METAL CO OWNER/OPERATOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 345.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941926

Amount of Each Receipt this Period

75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

375.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 625 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ALBERT R. ERB

Mailing Address 2031 BAY BLVD

City State Zip Code
SEASIDE HEIGHTS NJ 08751-1001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 355.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935721

Amount of Each Receipt this Period
30.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ALBERT R. ERB

Mailing Address 2031 BAY BLVD

City State Zip Code
SEASIDE HEIGHTS NJ 08751-1001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 355.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949845

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ALBERT R. ERB

Mailing Address 2031 BAY BLVD

City State Zip Code
SEASIDE HEIGHTS NJ 08751-1001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 355.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959707

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 95.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 626 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DOUGLAS ERICKSON

Mailing Address 113 LAKELAND HILLS DR

City State Zip Code
FAIRVIEW HEIGHTS IL 62208-3434

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 330.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13948170

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
FRED ERICKSON

Mailing Address 11939 NE DAVIS ST. APT. 109

City State Zip Code
PORTLAND OR 97220-2162

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 421.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940142

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HARVEY R. ERICKSON

Mailing Address 39974 CRANE LAKE DR.

City State Zip Code
BATTLE LAKE MN 56515-9256

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13945122

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 140.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 627 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DAVID ERMER

Mailing Address 7287 ABERDEEN RD

City State Zip Code
BETHESDA MD 20814

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ATTORNEY LAWYER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
10 / 30 / 2010

Transaction ID: SA11.13960674

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
EDDIE ERNETA

Mailing Address 152-75 JEWEL AVENUE

City State Zip Code
FLUSHING NY 11367-1435

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DELTA AIRLINES CUSTOMER SERVICE REP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13954455

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ALFRED R. ERNST, JR.

Mailing Address 2079 ILLINOIS AVE NE

City State Zip Code
ST PETERSBURG FL 33703-3423

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RAYMOND JAMES FINANCIAL, INC. INVESTMENTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13952281

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **400.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 628 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. CAROLYNE M. ERVIN
Mailing Address 4112 E FRANK PHILLIPS BLVD
City BARTLESVILLE State OK Zip Code 74006-8324
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 290.00
Date of Receipt 10 / 14 / 2010
Transaction ID: SA11.13918648
Amount of Each Receipt this Period 85.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. DOROTHY ERVIN
Mailing Address 280 ERVIN LN
City MCMINNVILLE State TN Zip Code 37110-4419
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 205.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13928966
Amount of Each Receipt this Period 55.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JIM ERVIN
Mailing Address 106 NORTH CAROLINA AVENUE S.E.
City WASHINGTON State DC Zip Code 20003-1841
FEC ID number of contributing federal political committee. **C**
Name of Employer ETA Occupation PRESIDENT
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00
Date of Receipt 11 / 10 / 2010
Transaction ID: SA11.13968711
Amount of Each Receipt this Period 500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 640.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 629 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. SAMUEL D. ERVIN	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 7 / 2 0 1 0
	Mailing Address 7432 LEAPWOOD ENVILLE RD	Transaction ID: SA11.13955878
	City State Zip Code ADAMSVILLE TN 38310-3350	Amount of Each Receipt this Period 110.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 370.00	

B.	Full Name (Last, First, Middle Initial) MR. MICHAEL ESANTSI	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 8 / 2 0 1 0
	Mailing Address 7015 ARROW CREEK LANE	Transaction ID: SA11.13958239
	City State Zip Code SPRING TX 77379-2759	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

C.	Full Name (Last, First, Middle Initial) DR. LUIS A. ESCOBAR	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 8 / 2 0 1 0
	Mailing Address 3510 NE 23 AVE	Transaction ID: SA11.13959015
	City State Zip Code LIGHTHOUSE POINT FL 33064-8129	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer LESCOBAR, PA	Occupation PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1900.00	

SUBTOTAL of Receipts This Page (optional)	2710.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 630 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. LUIS A. ESCOBAR

Mailing Address 3510 NE 23 AVE

City State Zip Code
LIGHTHOUSE POINT FL 33064-8129

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LESCOBAR, PA PHYSICIAN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1900.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959018

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ANTHONY C. ESSIG

Mailing Address 1618 S. COURTLAND AVENUE

City State Zip Code
KOKOMO IN 46902-2056

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933343

Amount of Each Receipt this Period
101.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JAMES T. ESTES

Mailing Address 70 N CAROLINE ST

City State Zip Code
NOXAPATER MS 39346-8700

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 503.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930095

Amount of Each Receipt this Period
30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 231.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 631 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JAMES T. ESTES
Mailing Address 70 N CAROLINE ST
City NOXAPATER State MS Zip Code 39346-8700
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 503.50
Date of Receipt 10 / 25 / 2010
Transaction ID: SA11.13952399
Amount of Each Receipt this Period 25.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JAMES T. ESTES
Mailing Address 70 N CAROLINE ST
City NOXAPATER State MS Zip Code 39346-8700
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 503.50
Date of Receipt 10 / 25 / 2010
Transaction ID: SA11.13954883
Amount of Each Receipt this Period 15.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. EMILY W. ETTINGER
Mailing Address 1225 BARCLAY MANOR WAY
City RALEIGH State NC Zip Code 27614-7140
FEC ID number of contributing federal political committee. **C**
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00
Date of Receipt 11 / 08 / 2010
Transaction ID: SA11.13966880
Amount of Each Receipt this Period 150.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 190.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 632 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. BRENDA EUBANKS	Date of Receipt MM / DD / YYYY 10 / 29 / 2010
	Mailing Address 407 N AVENUE Z	Transaction ID: SA11.13959108
	City State Zip Code CLIFTON TX 76634-1143	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00	

B.	Full Name (Last, First, Middle Initial) MR. GERALD L. EUBANK	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 2929 BEECH BLUFF RD	Transaction ID: SA11.13933066
	City State Zip Code JACKSON TN 38301-9093	Amount of Each Receipt this Period 101.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 281.00	

C.	Full Name (Last, First, Middle Initial) MR. LARRY B. EUBANKS	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 7162 TARA DR	Transaction ID: SA11.13948884
	City State Zip Code VILLA RICA GA 30180-3916	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer POWER DISTRIBUTION	Occupation OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional)	▶	301.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 633 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. RAY H. EUBANK		Date of Receipt
	Mailing Address 4600 GREENVILLE AVE STE 106		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 1 9 / 2 0 1 0
	City	State	Zip Code
	DALLAS	TX	75206-5036
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13941072
Name of Employer SELF-EMPLOYED		Occupation OIL & GAS EXPLORATION	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	250.00
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) MRS. CARMEN EVANGELISTA		Date of Receipt
	Mailing Address 618 FREMONT AVENUE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 0 / 2 0 1 0
	City	State	Zip Code
	S. PASADENA	CA	91030-2528
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13943621
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 262.00	25.00
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) BILLIE EVANS		Date of Receipt
	Mailing Address 1717 QUEENS ROW		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 6 / 2 0 1 0
	City	State	Zip Code
	NACOGDOCHES	TX	75965-3705
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13957326
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	150.00
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	425.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 634 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DOUGLAS S. EVANS
Mailing Address P.O. BOX 451269
City GROVE State OK Zip Code 74345-1269
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 204.00
Date of Receipt 10 / 21 / 2010
Transaction ID: SA11.13942955
Amount of Each Receipt this Period 39.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GARY L. EVANS
Mailing Address 2740 HALLMARK RD
City LINCOLN State NE Zip Code 68507-2747
FEC ID number of contributing federal political committee. **C**
Name of Employer LINCOLN ELECTRIC SYSTEM Occupation ADMIN SUPPORT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 221.00
Date of Receipt 10 / 26 / 2010
Transaction ID: SA11.13956966
Amount of Each Receipt this Period 20.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. KAREN S. EVANS
Mailing Address 218 FIREFLY LANE
City MARTINSBURG State WV Zip Code 25403-1068
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1186.00
Date of Receipt 10 / 20 / 2010
Transaction ID: SA11.13943759
Amount of Each Receipt this Period 51.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 110.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 635 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. MARIANNE D. EVANS

Mailing Address 5050 LYDA LN

City State Zip Code
COLORADO SPRINGS CO 80904-1008

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13969326

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. ROBERT B. EVANS

Mailing Address 656 S EVERGREEN ST.

City State Zip Code
PLYMOUTH MI 48170-1514

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
RETIRED

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930392

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

ROBERT J. EVANS

Mailing Address 206 SYCAMORE LN

City State Zip Code
BRYAN OH 43506-9291

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
RETIRED

Aggregate Year-to-Date ▼
201.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936668

Amount of Each Receipt this Period

1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

226.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 636 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. SAMUEL K. EVANS

Mailing Address 945 S CLOVIS AVE
UNIT U

City FRESNO State CA Zip Code 93727-4530

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 10 / 14 / 2010
Transaction ID: SA11.13930019
 Amount of Each Receipt this Period: 40.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. SAMUEL W. EVANS

Mailing Address 220 W RIDGE DR.

City CANTON State GA Zip Code 30114-6875

FEC ID number of contributing federal political committee. **C**

Name of Employer NATIONAL COMMODITY SALE Occupation FOOD BROKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13934654
 Amount of Each Receipt this Period: 100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. SAMUEL W. EVANS

Mailing Address 220 W RIDGE DR.

City CANTON State GA Zip Code 30114-6875

FEC ID number of contributing federal political committee. **C**

Name of Employer NATIONAL COMMODITY SALE Occupation FOOD BROKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13935300
 Amount of Each Receipt this Period: 1.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 141.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 637 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
TERRI L. EVANS

Mailing Address 118 JEFFREY PL.

City State Zip Code
SMYRNA GA 30082-3678

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EXECUTIVE AFFILIATES, INC VICE PRESIDE OF OPERATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959434

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. THOMAS E. EVANS

Mailing Address P.O. BOX 658

City State Zip Code
ELBERTON GA 30635-0658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED GEOLOGIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952522

Amount of Each Receipt this Period
1.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM D. EVANS

Mailing Address 5488 TREVINO WAY

City State Zip Code
BANNING CA 92220-6445

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959835

Amount of Each Receipt this Period
60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 161.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 638 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. IRWIN R. EVENS

Mailing Address 5161 ROSEGATE LN APT A
APT A

City INDIANAPOLIS State IN Zip Code 46237-8460

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: MM / DD / YYYY
10 / 20 / 2010

Transaction ID: SA11.13943289

Amount of Each Receipt this Period: 10.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. IRWIN R. EVENS

Mailing Address 5161 ROSEGATE LN APT A
APT A

City INDIANAPOLIS State IN Zip Code 46237-8460

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: MM / DD / YYYY
10 / 20 / 2010

Transaction ID: SA11.13945053

Amount of Each Receipt this Period: 10.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. IRWIN R. EVENS

Mailing Address 5161 ROSEGATE LN APT A
APT A

City INDIANAPOLIS State IN Zip Code 46237-8460

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13954338

Amount of Each Receipt this Period: 20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 40.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 639 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. IRWIN R. EVENS

Mailing Address 5161 ROSEGATE LN APT A
APT A

City INDIANAPOLIS State IN Zip Code 46237-8460

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 19 / 2010
Transaction ID: SA11.13972077
 Amount of Each Receipt this Period 20.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. ELIZABETH A. EVERS

Mailing Address 7559 DOWERDELL LN. W

City LAKEWOOD State WA Zip Code 98499-8154

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 271.00

Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13936224
 Amount of Each Receipt this Period 25.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. ELIZABETH A. EVERS

Mailing Address 7559 DOWERDELL LN. W

City LAKEWOOD State WA Zip Code 98499-8154

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 271.00

Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13951015
 Amount of Each Receipt this Period 15.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 60.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 640 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. LINDA M. EVERSON

Mailing Address 14970 SE BRIGHTWOOD AVE

City State Zip Code
PORTLAND OR 97267-3283

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LINDA EVERSON APPLICATION SUPPORT ANALY

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 215.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13961086

Amount of Each Receipt this Period

20.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
HUGH EWING

Mailing Address 955 HARPERSVILLE RD. APT. 3070

City State Zip Code
NEWPORT NEWS VA 23601-1087

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939588

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
HUGH EWING

Mailing Address 955 HARPERSVILLE RD. APT. 3070

City State Zip Code
NEWPORT NEWS VA 23601-1087

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946487

Amount of Each Receipt this Period

15.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

60.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 641 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
HUGH EWING

Mailing Address 955 HARPERSVILLE RD. APT. 3070

City State Zip Code
NEWPORT NEWS VA 23601-1087

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13972938

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. ROSE ANN EYHERABIDE

Mailing Address 18912 W. INDIAN SCHOOL ROAD

City State Zip Code
LITCHFIELD PARK AZ 85340

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED AGRICULTURE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1051.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13972992

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. ROSE ANN EYHERABIDE

Mailing Address 18912 W. INDIAN SCHOOL ROAD

City State Zip Code
LITCHFIELD PARK AZ 85340

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED AGRICULTURE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1051.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13972995

Amount of Each Receipt this Period

1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

276.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 642 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. MARY ETTA EYINK	Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address 6630 BRUCE RD.	Transaction ID: SA11.13963974
	City State Zip Code CELINA OH 45822-9143	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

B.	Full Name (Last, First, Middle Initial) RODERIC FABIAN	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 4004 MONTROSE BLVD	Transaction ID: SA11.13931460
	City State Zip Code HOUSTON TX 77006-4900	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation BAYLOR COLLEGE OF MEDICINE PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) ALFRED FABRICO	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 712 BAYBERRY LN.	Transaction ID: SA11.13956077
	City State Zip Code WILLIAMSTOWN NJ 08094-9709	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	▶	620.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 643 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. MIKE A. FAHEY

Mailing Address 1300 SW FOREST MEADOWS WAY

City State Zip Code
LAKE OSWEGO OR 97034-1538

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
COLUMBIA HELICOPTER PRESIDENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13959340

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. SAMUEL J. FAIELLO

Mailing Address 7 SANDY RIDGE ROAD

City State Zip Code
STOCKTON NJ 08559-1605

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SHORE WATER PRESIDENT OF WATER UTILITY

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 835.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13969221

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. JANICE O. FAIKS

Mailing Address 12967 QUARTER HORSE LN

City State Zip Code
LEESBURG VA 20176-5513

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PHRMA ATTORNEY

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 351.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930243

Amount of Each Receipt this Period

26.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2626.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 644 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RODDEY B. FAILE

Mailing Address 2715 FAILE RD.

City State Zip Code
ROCK HILL SC 29730-8004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 221.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13934471

Amount of Each Receipt this Period
21.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PAULA FAILLACE

Mailing Address 13030 CONEFER RD

City State Zip Code
HOUSTON TX 77079-7345

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13946876

Amount of Each Receipt this Period
300.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JERRY C. FAIN

Mailing Address 995 COUNTY RD. 1

City State Zip Code
SOUTH POINT OH 45680-8866

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED ELECTRICAL CONTRACTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2010

Transaction ID: SA11.13964947

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **361.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 645 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. HENRY FAIR	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 101 MARY ST	Transaction ID: SA11.13937075
	City State Zip Code MOUNT PLEASANT SC 29464-4315	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) MR. GERALD FAIRBANKS	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 160 E SODERBERG RD APT B5	Transaction ID: SA11.13929225
	City State Zip Code ALLYN WA 98524-7700	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00	

C.	Full Name (Last, First, Middle Initial) MR. KARL D. FAIRCHILD	Date of Receipt MM / DD / YYYY 10 / 29 / 2010
	Mailing Address 9207 GEYSER AVE	Transaction ID: SA11.13961658
	City State Zip Code NORTHRIDGE CA 91324-3026	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional)	305.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 646 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. JANE C. FALCKE

Mailing Address P.O. BOX 225

City

GENOA

State

NV

Zip Code

89411-0225

FEC ID number of contributing federal political committee.

C

Name of Employer
THE GENOA COMPANY INC.

Occupation
MANAGER

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951544

Amount of Each Receipt this Period

80.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

FIMA FALIC

Mailing Address 9999 COLLINS AVE APT 3A
APARTMENT 3A

City

BAL HARBOUR

State

FL

Zip Code

33154-1832

FEC ID number of contributing federal political committee.

C

Name of Employer
DUTY FREE AMERICAS

Occupation
BUSINESSMAN/CONSULTANT

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

5450.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963333

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

FIMA FALIC

Mailing Address 9999 COLLINS AVE APT 3A
APARTMENT 3A

City

BAL HARBOUR

State

FL

Zip Code

33154-1832

FEC ID number of contributing federal political committee.

C

Name of Employer
DUTY FREE AMERICAS

Occupation
BUSINESSMAN/CONSULTANT

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

5450.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13964641

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

430.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 647 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. ELAYNE S. FALK

Mailing Address 7909 INTERLAKEN DR. SW

City State Zip Code
LAKEWOOD WA 98498-5706

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GYPSUM WALLBOARD SUPPLY SELF-EMPLOYED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 461.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 4 / 2 0 1 0

Transaction ID: SA11.13965171

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
PATRICIA FALK

Mailing Address 6302 SCENIC VIEW DRIVE

City State Zip Code
HOSCHTON GA 30548-8215

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929416

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. SALLYANN FAMA

Mailing Address 1361 E 56TH ST.

City State Zip Code
CHICAGO IL 60637-1754

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 395.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928904

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

245.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 648 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. SALLYANN FAMA

Mailing Address 1361 E 56TH ST.

City State Zip Code
CHICAGO IL 60637-1754

FEC ID number of contributing federal political committee. **C**

Name of Employer: INFORMATION REQUESTED PER BEST EFFORTS
Occupation: INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
395.00

Date of Receipt: 11 / 22 / 2010
Transaction ID: SA11.13973160
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. CAROL FAMULARI

Mailing Address 301 LAKE GROVE DR

City State Zip Code
COLDSRING TX 77331-3218

FEC ID number of contributing federal political committee. **C**

Name of Employer: SPECIALITIES COMPANY
Occupation: INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt: 10 / 29 / 2010
Transaction ID: SA11.13961869
Amount of Each Receipt this Period: 75.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GARRY R. FANCHER

Mailing Address 2370 WILLEO RILL RD

City State Zip Code
MARIETTA GA 30062-6533

FEC ID number of contributing federal political committee. **C**

Name of Employer: SELF-EMPLOYED
Occupation: OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13931870
Amount of Each Receipt this Period: 75.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **175.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 649 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOSE F. FANJUL, JR.
Mailing Address 201 GARDEN ROAD
City PALM BEACH State FL Zip Code 33480-3219
FEC ID number of contributing federal political committee. **C**
Name of Employer FLORIDA CRYSTALS CORPORAT-ION Occupation EXECUTIVE
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 7500.00
Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13945600
Amount of Each Receipt this Period 7500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. MANDAN F. FARAHATI
Mailing Address 1351 E WESTLEIGH RD
City LAKE FOREST State IL Zip Code 60045-3335
FEC ID number of contributing federal political committee. **C**
Name of Employer MAGNA HEALTH SYSTEM Occupation PHYSICIAN
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1480.00
Date of Receipt 10 / 26 / 2010
Transaction ID: SA11.13956380
Amount of Each Receipt this Period 215.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL J. FARGNOLI
Mailing Address 10 TANNER WOODS
City SAN ANTONIO State TX Zip Code 78248-1628
FEC ID number of contributing federal political committee. **C**
Name of Employer MUTUAL OF OMAHA Occupation GENERAL MANAGER
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13933468
Amount of Each Receipt this Period 100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 7815.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 650 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) JAMES FARINA	Date of Receipt MM / DD / YYYY 11 / 17 / 2010
	Mailing Address 20 PALMA ROAD	Transaction ID: SA11.13969839
	City State Zip Code SOMERS NY 10589-2807	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer WEST FAIR ELECTRIC	Occupation ELECTRIC CONTRACTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	

B.	Full Name (Last, First, Middle Initial) JAMES FARINA	Date of Receipt MM / DD / YYYY 11 / 17 / 2010
	Mailing Address 20 PALMA ROAD	Transaction ID: SA11.13969907
	City State Zip Code SOMERS NY 10589-2807	Amount of Each Receipt this Period 1.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer WEST FAIR ELECTRIC	Occupation ELECTRIC CONTRACTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	

C.	Full Name (Last, First, Middle Initial) CELIA FARLEY HUDNALL	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 2646 JUNIPER AVE	Transaction ID: SA11.13946128
	City State Zip Code COLUMBUS GA 31907-2630	Amount of Each Receipt this Period 35.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional)	▶	136.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 651 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
CELIA FARLEY HUDNALL

Mailing Address 2646 JUNIPER AVE

City State Zip Code
COLUMBUS GA 31907-2630

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952177

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. PATRICIA R. FARLEY

Mailing Address 3150 SPRING LAKE DR NE

City State Zip Code
CONYERS GA 30013-1448

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GTP ART INSTRUCTOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938479

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. AARON A. FARMER

Mailing Address 2305 ISLAND COVE CIR
STE 600

City State Zip Code
NAPLES FL 34109

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FOLWLER WHITE BOGGS BANKER PRESIDENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951523

Amount of Each Receipt this Period
210.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 335.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 652 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DR. JOSEPH F. FARMER

Mailing Address 277 PLEASANT VALLEY DR

City State Zip Code
LITTLE ROCK AR 72212-3170

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ST VINCENT HOSP DR.

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942863

Amount of Each Receipt this Period

40.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DR. JOSEPH F. FARMER

Mailing Address 277 PLEASANT VALLEY DR

City State Zip Code
LITTLE ROCK AR 72212-3170

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ST VINCENT HOSP DR.

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13969709

Amount of Each Receipt this Period

40.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ANTHONY FARR

Mailing Address 1119 E 57TH AVE APT E303

City State Zip Code
SPOKANE WA 99223

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
S L START DIRECTOR OF OPERATIONS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933319

Amount of Each Receipt this Period

101.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

181.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 653 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. MERLE FARRELL	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 1300 HEATHER LN.	Transaction ID: SA11.13956869
	City State Zip Code LONGVIEW TX 75604-2832	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00	

B.	Full Name (Last, First, Middle Initial) MR. MICHAEL J. FARRELL	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 300 VILLAGE GRN STE 200 STE 200	Transaction ID: SA11.13944609
	City State Zip Code LINCOLNSHIRE IL 60069-3083	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer HAMCO, INC	Occupation OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) MR. MICHAEL WAYNE FARRIS	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 868 CEMETERY RD.	Transaction ID: SA11.13930101
	City State Zip Code DECATUR TX 76234-6506	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	

SUBTOTAL of Receipts This Page (optional)	300.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 654 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. THADDEUS FARRIS

Mailing Address P.O. BOX 135

City State Zip Code
MARBLE CITY OK 74945-0135

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13937082

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. THADDEUS FARRIS

Mailing Address P.O. BOX 135

City State Zip Code
MARBLE CITY OK 74945-0135

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	6	/	2	0	1	0

Transaction ID: SA11.13956269

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HELEN FARSON

Mailing Address 801 W COMMONWEALTH AVE APT. 22

City State Zip Code
ALHAMBRA CA 91801-3657

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	1	0

Transaction ID: SA11.13950330

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **115.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 655 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
HELEN FARSON

Mailing Address 801 W COMMONWEALTH AVE APT. 22

City ALHAMBRA State CA Zip Code 91801-3657

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 25 / 2010

Transaction ID: SA11.13954886

Amount of Each Receipt this Period 30.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RUTH M. FASOLINO

Mailing Address 120 WHIPSTICK RD

City RIDGEFIELD State CT Zip Code 06877-5030

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 18 / 2010

Transaction ID: SA11.13933595

Amount of Each Receipt this Period 250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. MARILYN FAULKNER

Mailing Address 1141 WESTERN HILLS RD

City ROCKDALE State TX Zip Code 76567-5284

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt 11 / 02 / 2010

Transaction ID: SA11.13962677

Amount of Each Receipt this Period 210.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 490.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 656 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. ELLEN S. FAUVER

Mailing Address 2820 GLENWOOD GARDENS LANE UNI

City State Zip Code
RALEIGH NC 27608-1348

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
US AIRWAYS FLIGHT ATTENDANT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963716

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. MARY H. FAVRE

Mailing Address 2934 OAKLAND DRIVE

City State Zip Code
SUGAR LAND TX 77479-2450

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957930

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. SHERWOOD L. FAWCETT

Mailing Address 1800 RIVERSIDE DR APT 2314
APARTMENT 2314

City State Zip Code
COLUMBUS OH 43212-1823

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13947045

Amount of Each Receipt this Period

21.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

671.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 657 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. ANN F. FAZENDE

Mailing Address 8736 DONNAWAY ST

City State Zip Code
METAIRIE LA 70003-5220

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	1	0

Transaction ID: SA11.13931902

Amount of Each Receipt this Period
35.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DINO FAZLIBEGU

Mailing Address 401 9TH STREET N.W.
SUITE 900

City State Zip Code
WASHINGTON DC 20004-2145

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	0	/	2	0	1	0

Transaction ID: SA11.13968697

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. THOMAS FEALTMAN

Mailing Address 12 RAILROAD AVE

City State Zip Code
EAST PENNSBORO PA 17025-2250

FEC ID number of contributing federal political committee. **C**

Name of Employer HAMPDEN TOWNSHIP
Occupation COLLECTION SYSTEM

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13929534

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **585.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 658 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
TERENCE FEATHER

Mailing Address 36 WOODSTREAM DR.

City State Zip Code
CHESTERBROOK PA 19087-5877

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TALEO CORP SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933292

Amount of Each Receipt this Period
101.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
F. FEDORA

Mailing Address 17822 ACACIA DR.

City State Zip Code
N FT MYERS FL 33917-2016

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 556.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956949

Amount of Each Receipt this Period
80.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
F. FEDORA

Mailing Address 17822 ACACIA DR.

City State Zip Code
N FT MYERS FL 33917-2016

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 556.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 1 0

Transaction ID: SA11.13971988

Amount of Each Receipt this Period
80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 261.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 659 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. FRANCES B. FEDORA

Mailing Address 17822 ACACIA DR.

City State Zip Code
N FT MYERS FL 33917-2016

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2376.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956950

Amount of Each Receipt this Period

195.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. FRANCES B. FEDORA

Mailing Address 17822 ACACIA DR.

City State Zip Code
N FT MYERS FL 33917-2016

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2376.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963208

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. FRANCES B. FEDORA

Mailing Address 17822 ACACIA DR.

City State Zip Code
N FT MYERS FL 33917-2016

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2376.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 1 0

Transaction ID: SA11.13972022

Amount of Each Receipt this Period

195.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

540.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 660 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
BERNADETTE FEE

Mailing Address 653 E 14TH. ST. APT. 11E

City State Zip Code
NEW YORK NY 10009-3136

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13953402

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOSEPH M. FEE

Mailing Address 620 SAND HILL RD. APT. 113D

City State Zip Code
PALO ALTO CA 94304-2071

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1505.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	1	0

Transaction ID: SA11.13943390

Amount of Each Receipt this Period
400.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. DAVID F. FELSBURG

Mailing Address 5844 ROBEYS MEADOW LN

City State Zip Code
FAIRFAX VA 22030-5816

FEC ID number of contributing federal political committee. **C**

Name of Employer US VET TECHNOLOGIES INC
Occupation EXECUTIVE C.E.O.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
840.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13933553

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **600.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 661 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. DAVID F. FELSBURG

Mailing Address 5844 ROBEYS MEADOW LN

City State Zip Code
FAIRFAX VA 22030-5816

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
US VET TECHNOLOGIES INC EXECUTIVE C.E.O.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 840.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948920

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. DAVID F. FELSBURG

Mailing Address 5844 ROBEYS MEADOW LN

City State Zip Code
FAIRFAX VA 22030-5816

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
US VET TECHNOLOGIES INC EXECUTIVE C.E.O.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 840.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Transaction ID: SA11.13968205

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CHRISTOPHER FELTON

Mailing Address 8 BUTLER ROAD

City State Zip Code
MENDON MA 01756-1335

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952987

Amount of Each Receipt this Period
125.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 275.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 662 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GEORGE W. FENIMORE

Mailing Address 13187 CHALON ROAD

City State Zip Code
LOS ANGELES CA 90049-1210

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Transaction ID: SA11.13968209

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. DOUGLAS FERNANDES

Mailing Address 1518 S HACKBERRY ST

City State Zip Code
PECOS TX 79772-5710

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941817

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. VERA M. FERNAU

Mailing Address 112 MALLARD DR.

City State Zip Code
ARANSAS PASS TX 78336-3222

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 11336.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940928

Amount of Each Receipt this Period
750.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **875.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 663 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. VERA M. FERNAU

Mailing Address 112 MALLARD DR.

City ARANSAS PASS State TX Zip Code 78336-3222

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 11336.00

Date of Receipt 10 / 27 / 2010

Transaction ID: SA11.13955977

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MARK FESEN

Mailing Address 2609 LINKSLAND DRIVE

City HUTCHINSON State KS Zip Code 67502-9260

FEC ID number of contributing federal political committee. **C**

Name of Employer HUTCHINSON CLINIC Occupation PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 21 / 2010

Transaction ID: SA11.13971556

Amount of Each Receipt this Period 500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LT. COL. THOMAS J. FEY

Mailing Address 115 ORCHARD CREST LN

City BONAIRE State GA Zip Code 31005-4024

FEC ID number of contributing federal political committee. **C**

Name of Employer US AIRFORCE Occupation CHAPLAIN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt 10 / 18 / 2010

Transaction ID: SA11.13929281

Amount of Each Receipt this Period 75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1575.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 664 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. LUKE FICHTHORN, III

Mailing Address 430 COCONUT PALM RD

City State Zip Code
VERO BEACH FL 32963-3709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938820

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. BESSIE FICKEL

Mailing Address 5903 TILBURY RD.

City State Zip Code
ALEXANDRIA VA 22310-1609

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954808

Amount of Each Receipt this Period
45.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. BESSIE FICKEL

Mailing Address 5903 TILBURY RD.

City State Zip Code
ALEXANDRIA VA 22310-1609

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963626

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1085.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 665 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
GERALD H. FICKENSCHER

Mailing Address 888 BLVD. OF THE ARTS APT. 705

City State Zip Code
SARASOTA FL 34236-4830

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 10 / 28 / 2010
Transaction ID: SA11.13959708
Amount of Each Receipt this Period: 150.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. CLAIRE E. FIELD

Mailing Address 3373 HADFIELD GREENE

City State Zip Code
SARASOTA FL 34235-5100

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13948235
Amount of Each Receipt this Period: 150.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GREGORY E. FIELD

Mailing Address 7833 YAKIMA AVE

City State Zip Code
TACOMA WA 98408-5318

FEC ID number of contributing federal political committee. **C**

Name of Employer UNEMPLOYED Occupation CONTRACTOR/SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13934082
Amount of Each Receipt this Period: 60.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 360.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 666 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) GREGORY E. FIELD		Date of Receipt
	Mailing Address 7833 YAKIMA AVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 1 / 2 0 1 0
	City	State	Zip Code
	TACOMA	WA	98408-5318
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13946541
		Amount of Each Receipt this Period	<input type="text"/> 40.00
Name of Employer UNEMPLOYED		Occupation CONTRACTOR/SALES	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 700.00	

B.	Full Name (Last, First, Middle Initial) GREGORY E. FIELD		Date of Receipt
	Mailing Address 7833 YAKIMA AVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	City	State	Zip Code
	TACOMA	WA	98408-5318
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13953324
		Amount of Each Receipt this Period	<input type="text"/> 60.00
Name of Employer UNEMPLOYED		Occupation CONTRACTOR/SALES	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 700.00	

C.	Full Name (Last, First, Middle Initial) GREGORY E. FIELD		Date of Receipt
	Mailing Address 7833 YAKIMA AVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 8 / 2 0 1 0
	City	State	Zip Code
	TACOMA	WA	98408-5318
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13960431
		Amount of Each Receipt this Period	<input type="text"/> 60.00
Name of Employer UNEMPLOYED		Occupation CONTRACTOR/SALES	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 700.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 160.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 667 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
GREGORY E. FIELD

Mailing Address 7833 YAKIMA AVE

City State Zip Code
TACOMA WA 98408-5318

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UNEMPLOYED CONTRACTOR/SALES

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13960432

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. HENRY W. FIELDS, SR.

Mailing Address 2115 1ST AVE SE APT 2218
APARTMENT 2218

City State Zip Code
CEDAR RAPIDS IA 52402-6384

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1126.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948534

Amount of Each Receipt this Period
226.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. MOLLY H. FIELD

Mailing Address 42 WILD MEADOW CT

City State Zip Code
SPRING TX 77380-4300

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
VINCENT AND ELKIN HR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 330.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931623

Amount of Each Receipt this Period
105.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **371.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 668 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. NANCY D. FIELD

Mailing Address 9 STIMSON AVE

City State Zip Code
PROVIDENCE RI 02906-3206

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950544

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. WENDY FIFE

Mailing Address PO BOX 10

City State Zip Code
VERNONIA OR 97064-0010

FEC ID number of contributing federal political committee. **C**

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928951

Amount of Each Receipt this Period

75.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. JUDY M. FIGGE

Mailing Address 4432 STATE HIGHWAY 25 SE

City State Zip Code
BUFFALO MN 55313-8002

FEC ID number of contributing federal political committee. **C**

Name of Employer
PRAIRIE RIVER HOME CARE
INC

Occupation
CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951312

Amount of Each Receipt this Period

710.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

885.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 669 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. AIDA M. FIGUEROA

Mailing Address 2-01 KENNETH AVE

City State Zip Code
FAIR LAWN NJ 07410-2049

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 261.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953272

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DENNIS FIKES

Mailing Address 1118 LISA LN.

City State Zip Code
KINGWOOD TX 77339-3430

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WARREN ALLOY PRODUCT SALES MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948814

Amount of Each Receipt this Period
90.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DENNIS FIKES

Mailing Address 1118 LISA LN.

City State Zip Code
KINGWOOD TX 77339-3430

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WARREN ALLOY PRODUCT SALES MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 1 0

Transaction ID: SA11.13972011

Amount of Each Receipt this Period
90.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 280.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 670 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. PRESTON FILGER		Date of Receipt
	Mailing Address 330 N HWY 291		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	LIBERTY	MO	64068
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13928010
Name of Employer FILGER & JONES ENTERPRISES		Occupation OWNER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 300.00
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MR. FRANK A. FILICE		Date of Receipt
	Mailing Address 118 MARIGOLD LN.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	MILFORD	PA	18337-7323
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13971197
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 60.00
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) JAN G. FILIP		Date of Receipt
	Mailing Address P.O. BOX 129		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	GLEN	NH	03838-0129
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13953619
Name of Employer SELF-EMPLOYED		Occupation SELF-EMPLOYED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 61.00
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 421.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 671 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JAN G. FILIP

Mailing Address P.O. BOX 129

City State Zip Code
GLEN NH 03838-0129

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 401.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961681

Amount of Each Receipt this Period

60.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

FRANK FINCHUM

Mailing Address 3129 PEBBLE BEACH LN.

City State Zip Code
ORANGE TX 77630-2123

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 435.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940689

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

PHYLLIS FINE

Mailing Address 266 TRAILWOOD LANE

City State Zip Code
NORTHBROOK IL 60062-1031

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929773

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

260.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 672 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
PHYLLIS FINE

Mailing Address 266 TRAILWOOD LANE

City NORTHBROOK State IL Zip Code 60062-1031

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13942967
 Amount of Each Receipt this Period: 100.00
 CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. RAYMOND N. FINK

Mailing Address P.O. BOX 134

City WILLIAMSTON State MI Zip Code 48895-0134

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13942562
 Amount of Each Receipt this Period: 210.00
 CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. RICHARD E. FINLEY

Mailing Address 1240 N DOMINION AVE

City PASADENA State CA Zip Code 91104-3134

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 218.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13949256
 Amount of Each Receipt this Period: 10.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 320.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 673 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. DANIEL F. FINNANE	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 46300 AMETHYST DR	Transaction ID: SA11.13931304
	City State Zip Code INDIAN WELLS CA 92210-8611	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) MR. CLAUDE S. FINNEY	Date of Receipt MM / DD / YYYY 11 / 19 / 2010
	Mailing Address 106 BEECHWOOD DR	Transaction ID: SA11.13970057
	City State Zip Code SPARTANBURG SC 29307-2223	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

C.	Full Name (Last, First, Middle Initial) MR. JOSEPH J. FINNEGAN	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 2001 DIPINTO AVE	Transaction ID: SA11.13947830
	City State Zip Code HENDERSON NV 89052-6983	Amount of Each Receipt this Period 210.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RECOVERY EQUITY PARTNERS PARTNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 485.00	

SUBTOTAL of Receipts This Page (optional)	▶	340.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 674 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. DOROTHY L. FINSTICK

Mailing Address 1207 S. WOODLAND AVENUE
APARTMENT 103

City MICHIGAN CITY State IN Zip Code 46360-7144

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 398.00

Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13938058
Amount of Each Receipt this Period 25.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. FRANK A. FIORITO

Mailing Address 130 OAKLAND RD.

City MAPLEWOOD State NJ Zip Code 07040-2314

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 670.00

Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13948810
Amount of Each Receipt this Period 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. MELVIN J. FIREOVID

Mailing Address 3081 WILLIAMS CREEK DR

City CINCINNATI State OH Zip Code 45244-3262

FEC ID number of contributing federal political committee. **C**

Name of Employer TRI STATE WIRE ROPE Occupation SECRETARY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt 10 / 20 / 2010
Transaction ID: SA11.13938790
Amount of Each Receipt this Period 40.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 165.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 675 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ERNEST FISCHER

Mailing Address 16649 FM 624

City State Zip Code
ROBSTOWN TX 78380-6076

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED TRAILER DEALER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 310.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950376

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GUY R. FISCHER

Mailing Address 102 LANGFORD FARMS DR

City State Zip Code
BRANDON MS 39047-9253

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938594

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. JEANNETTE FISCHER

Mailing Address P.O. BOX 92

City State Zip Code
LOHMAN MO 65053-0092

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13938231

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 190.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 676 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MARGARET FISCHER, M.D.
Mailing Address 681 NW 73RD. AVE

City State Zip Code
PLANTATION FL 33317-1138

FEC ID number of contributing federal political committee. C

Name of Employer: INFORMATION REQUESTED PER BEST EFFORTS
Occupation: INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
251.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953544
Amount of Each Receipt this Period
101.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PAUL FISCHER
Mailing Address 340 N EDISON STREET

City State Zip Code
ARLINGTON VA 22203-1221

FEC ID number of contributing federal political committee. C

Name of Employer: FEDERAL GOVERNMENT
Occupation: ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 1 0

Transaction ID: SA11.13928742
Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. SHAWN FISCHER
Mailing Address 128 N. MAHAFFIE STREET

City State Zip Code
OLATHE KS 66061-3738

FEC ID number of contributing federal political committee. C

Name of Employer: BRETS AUTO WORKS
Occupation: MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
202.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918812
Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 151.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 677 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DONALD FISH

Mailing Address 3715 MIWOK PL

City State Zip Code
DAVIS CA 95618-5079

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957347

Amount of Each Receipt this Period
60.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PAUL W. FISH

Mailing Address P.O. BOX 239

City State Zip Code
JONES MILLS PA 15646-0239

FEC ID number of contributing federal political committee. **C**

Name of Employer P & JIP ASSETS LTD
Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1350.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 4 / 2 0 1 0

Transaction ID: SA11.13965607

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
REV. CLAUDIA FISHER

Mailing Address 1125 LANE 9

City State Zip Code
POWELL WY 82435-9306

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941943

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **185.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 678 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
REV. CLAUDIA FISHER

Mailing Address 1125 LANE 9

City	State	Zip Code
POWELL	WY	82435-9306

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13942230

Amount of Each Receipt this Period

30.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
REV. CLAUDIA FISHER

Mailing Address 1125 LANE 9

City	State	Zip Code
POWELL	WY	82435-9306

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13962389

Amount of Each Receipt this Period

30.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. EDWIN P. FISHER

Mailing Address 3493 ROYAL TURN LANE

City	State	Zip Code
BOYNTON BEACH	FL	33436-5404

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952872

Amount of Each Receipt this Period

75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

135.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 679 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. ETHEL D. FISHER
 Mailing Address 10290 WESTERN OAKS RD.
 City State Zip Code
 FORT WORTH TX 76108-9738
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 5 / 2 0 1 0
Transaction ID: SA11.13954096
 Amount of Each Receipt this Period
 15.00
CONTRIBUTION
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 220.00

B. Full Name (Last, First, Middle Initial)
MR. FREDERICK D. FISHER
 Mailing Address 7598 OLD BAY POINTE RD
 City State Zip Code
 MILTON FL 32583-2968
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 3 / 2 0 1 0
Transaction ID: SA11.13965101
 Amount of Each Receipt this Period
 50.00
CONTRIBUTION
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 650.00

C. Full Name (Last, First, Middle Initial)
MS. MARGARET FISHER
 Mailing Address 9 READING DR. APT. 328
 City State Zip Code
 WERNERSVILLE PA 19565-2025
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 5 / 2 0 1 0
Transaction ID: SA11.13953956
 Amount of Each Receipt this Period
 250.00
CONTRIBUTION
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

SUBTOTAL of Receipts This Page (optional) ► 315.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 680 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MELVIN FISK

Mailing Address 6056 WHITEHVEN CT

City State Zip Code
SAN JOSE CA 95138-2375

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938794

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BARBARA S. FITCH

Mailing Address 11 S WEST OAK DR.

City State Zip Code
HOUSTON TX 77056-2121

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961302

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROY E. FITE

Mailing Address 2801 WALNUT BEND LN APT 77

City State Zip Code
HOUSTON TX 77042-3445

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INTERNAL REVENUE SERVICE AUDITOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1450.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941794

Amount of Each Receipt this Period
700.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1050.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 681 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. WILLIAM FITSGERALD

Mailing Address 18 VER PLANCK ST

City State Zip Code
ALBANY NY 12206-1430

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 515.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955420

Amount of Each Receipt this Period

75.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. WILLIAM FITSGERALD

Mailing Address 18 VER PLANCK ST

City State Zip Code
ALBANY NY 12206-1430

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 515.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 1 0

Transaction ID: SA11.13972173

Amount of Each Receipt this Period

80.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
RICHARD P. FITZ GERALD

Mailing Address 5500 CALLE REAL APT. B103

City State Zip Code
SANTA BARBARA CA 93111-3611

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 1 0

Transaction ID: SA11.13972089

Amount of Each Receipt this Period

115.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

270.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 682 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. ELIZABETH S. FITZGERALD

Mailing Address P.O. BOX 211

City

FAYETTEVILLE

State

PA

Zip Code

17222-0211

FEC ID number of contributing federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

276.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936971

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RICHARD P. FITZGERALD

Mailing Address 5500 CALLE REAL APT. B103

City

SANTA BARBARA

State

CA

Zip Code

93111-3611

FEC ID number of contributing federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13945745

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RICHARD P. FITZGERALD

Mailing Address 5500 CALLE REAL APT. B103

City

SANTA BARBARA

State

CA

Zip Code

93111-3611

FEC ID number of contributing federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959977

Amount of Each Receipt this Period

115.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

190.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 683 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. THOMAS F. FITZGIBBON, SR.
Mailing Address 9640 REDING CIR

City State Zip Code
DES PLAINES IL 60016-1551

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935130

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. THOMAS F. FITZGIBBON, SR.
Mailing Address 9640 REDING CIR

City State Zip Code
DES PLAINES IL 60016-1551

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13969283

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MARK FITZPATRICK
Mailing Address 863 N BARLOW RD.

City State Zip Code
LINCOLN MI 48742-9794

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
KRIS MART OWNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951581

Amount of Each Receipt this Period
110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 310.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 684 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JEFFREY W. FITZWILLIAM

Mailing Address 7297 ROYALGREEN DR.

City	State	Zip Code
CINCINNATI	OH	45244-3650

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00
---	-------------------------------------

Date of Receipt

MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13929737

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JEFFREY W. FITZWILLIAM

Mailing Address 7297 ROYALGREEN DR.

City	State	Zip Code
CINCINNATI	OH	45244-3650

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00
---	-------------------------------------

Date of Receipt

MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13942922

Amount of Each Receipt this Period

400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. CHRIS FLAGET

Mailing Address PO BOX 264

City	State	Zip Code
HALLIDAY	ND	58636-0264

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS
--	--

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00
---	------------------------------------

Date of Receipt

MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13942528

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

700.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 685 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
LINDA H. FLANAGAN

Mailing Address 1026 CAPTAIN ADKINS DR

City State Zip Code
SOUTHPORT NC 28461-2659

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943524

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ARTHUR W. FLANNIGAN

Mailing Address 2945 TROSETH ROAD

City State Zip Code
SAINT PAUL MN 55113-1045

FEC ID number of contributing federal political committee. **C**

Name of Employer FLANNIGAN TRUCKING
Occupation TRUCK DRIVER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928321

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. GEORGE R. FLECK

Mailing Address 1155 RUGGLESTONE WAY

City State Zip Code
DULUTH GA 30097-8901

FEC ID number of contributing federal political committee. **C**

Name of Employer BRAND ENERGY & INFRASTRUCTURE SERVICES
Occupation HR MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13971360

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **190.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 686 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ARHUR E. FLEGEL

Mailing Address 1895 OAKDELL DR

City State Zip Code
MENLO PARK CA 94025-6167

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950325

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. HERMAN FLEISCHER

Mailing Address 93 E END AVE

City State Zip Code
HICKSVILLE NY 11801-2248

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13947489

Amount of Each Receipt this Period

30.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
JOSEPH FLEMING

Mailing Address 932 3RD. ST. S

City State Zip Code
VIRGINIA MN 55792-3010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 261.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930247

Amount of Each Receipt this Period

101.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

331.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 687 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. MARY P. FLEMING

Mailing Address 12700 SCHOOL CREEK RD

City State Zip Code
SAINT GEORGE KS 66535-9775

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 360.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937293

Amount of Each Receipt this Period

40.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. SARAH FLEMING

Mailing Address 3430 WOODGATE DRIVE

City State Zip Code
GRAND JUNCTION CO 81506-6503

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 245.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958890

Amount of Each Receipt this Period

20.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. PHILIP E. FLICK

Mailing Address 25067 ECHO CLIFF ROAD

City State Zip Code
MAPLE HILL KS 66507-8585

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SOY AND COMPANY ACCOUNTANT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 355.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941801

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 688 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. RUSSELL F. FLINT		Date of Receipt
	Mailing Address 224 REDWOOD DR.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 8 / 2 0 1 0
	City	State	Zip Code
	NEW ALBANY	IN	47150-4381
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13934421
		Amount of Each Receipt this Period	
		<input type="text"/> 20.00	
Name of Employer RETIRED		Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 255.00	

B.	Full Name (Last, First, Middle Initial) MS. SHERAN A. FLIPPO		Date of Receipt
	Mailing Address 1031 GRAND ISLE TER		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 9 / 2 0 1 0
	City	State	Zip Code
	PALM BEACH GARDENS	FL	33418-4582
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13931937
		Amount of Each Receipt this Period	
		<input type="text"/> 105.00	
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 215.00	

C.	Full Name (Last, First, Middle Initial) JUANITA RUTH FLOCKE		Date of Receipt
	Mailing Address 730 BABCOCK RD. APT. 1405		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	City	State	Zip Code
	SAN ANTONIO	TX	78201-2666
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13952127
		Amount of Each Receipt this Period	
		<input type="text"/> 50.00	
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 220.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 175.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 689 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DORENZA B. FLORENCE

Mailing Address 2327 LAMPARILLA WAY S

City State Zip Code
ST PETERSBURG FL 33712-3807

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932479

Amount of Each Receipt this Period
80.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN S. FLORY

Mailing Address 319 N 1ST ST APT 208

City State Zip Code
BRIDGEWATER VA 22812-1300

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937413

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. JOHN R. FLOYD

Mailing Address 272 WINDSOR PKWY NE

City State Zip Code
ATLANTA GA 30342-2780

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938478

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **130.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 690 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DR. JOHN R. FLOYD	Date of Receipt MM / DD / YYYY 11 / 20 / 2010
	Mailing Address 272 WINDSOR PKWY NE	Transaction ID: SA11.13971540
	City ATLANTA State GA Zip Code 30342-2780	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 275.00	

B.	Full Name (Last, First, Middle Initial) MR. WILLARD FLUCK	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 50128 850TH AVENUE	Transaction ID: SA11.13948315
	City HECTOR State MN Zip Code 55342-2034	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 310.00	

C.	Full Name (Last, First, Middle Initial) MR. EDWARD J. FLYNN	Date of Receipt MM / DD / YYYY 11 / 19 / 2010
	Mailing Address 7219 W GREENLEAF AVENUE	Transaction ID: SA11.13972059
	City CHICAGO State IL Zip Code 60631-1014	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 350.00	

SUBTOTAL of Receipts This Page (optional)	175.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 691 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. NANCY J. FOBES

Mailing Address 2285 HARKNESS CT

City BILOXI State MS Zip Code 39532-3126

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13931615
Amount of Each Receipt this Period: 30.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WALTER A. FOGARTY

Mailing Address PO BOX 637

City SHELTER IS State NY Zip Code 11964-0637

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13929190
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. LISBETH A. FOGG

Mailing Address 5505 RIVER RD.

City CAMILLA State GA Zip Code 31730-5813

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 10 / 27 / 2010
Transaction ID: SA11.13958451
Amount of Each Receipt this Period: 500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 580.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 692 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. ANTHONY C. FOGLEMAN

Mailing Address 10 26TH ST.

City State Zip Code
BUTNER NC 27509-2556

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PALLETONE OF NC, INC REGIONAL MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 912.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955037

Amount of Each Receipt this Period
210.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CLEVELAND B. FOGLEMAN

Mailing Address 107 MELBA CIR

City State Zip Code
CARRBORO NC 27510-1125

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FLF AUTOMOTIVE LOTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944750

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
THOMAS P. FOLGERT

Mailing Address 47 ABBOTT ST.

City State Zip Code
HOOSICK FALLS NY 12090-1349

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TACONIC CUSTOM MACHINE INC PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941448

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **310.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 693 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MR. DAN FOLLIS</p> <p>Mailing Address 133 W MARKET ST #205</p> <p>City INDIANAPOLIS State IN Zip Code 46204-2801</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 260.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 1 0</p> <p>Transaction ID: SA11.13929065</p> <p>Amount of Each Receipt this Period 260.00</p> <p>CONTRIBUTION</p>
---	---

<p>B. Full Name (Last, First, Middle Initial) MR. RALPH E. FOLSOM</p> <p>Mailing Address 5421 EDINGTON LN</p> <p>City RALEIGH State NC Zip Code 27604-5941</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer RTI INTERNATIONAL Occupation ANYLIST</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 245.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 1 0</p> <p>Transaction ID: SA11.13929602</p> <p>Amount of Each Receipt this Period 85.00</p> <p>CONTRIBUTION</p>
---	--

<p>C. Full Name (Last, First, Middle Initial) ROSE FONG</p> <p>Mailing Address 6440 HAVENSIDE DR.</p> <p>City SACRAMENTO State CA Zip Code 95831-1504</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 225.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 1 0</p> <p>Transaction ID: SA11.13933886</p> <p>Amount of Each Receipt this Period 50.00</p> <p>CONTRIBUTION</p>
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SUBTOTAL of Receipts This Page (optional)	395.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 694 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ROSE FONG	Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 1 0
	Mailing Address 6440 HAVENSIDE DR.	Transaction ID: SA11.13937908
	City State Zip Code SACRAMENTO CA 95831-1504	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00

B.	Full Name (Last, First, Middle Initial) ROSE FONG	Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 1 0
	Mailing Address 6440 HAVENSIDE DR.	Transaction ID: SA11.13938261
	City State Zip Code SACRAMENTO CA 95831-1504	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00

C.	Full Name (Last, First, Middle Initial) ROSE FONG	Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0
	Mailing Address 6440 HAVENSIDE DR.	Transaction ID: SA11.13972053
	City State Zip Code SACRAMENTO CA 95831-1504	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00

SUBTOTAL of Receipts This Page (optional)	▶	125.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 695 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MISS SHIRLEY FONG

Mailing Address 147 CASTLE DR

City State Zip Code
PITTSBURGH PA 15235-1855

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UPMC MEDICAL RECORDS CODER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934289

Amount of Each Receipt this Period
101.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GEORGE W. FONSECA

Mailing Address 400 GARVER RD

City State Zip Code
MANSFIELD OH 44903-9057

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 760.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951444

Amount of Each Receipt this Period
260.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. CAROLE FONTAINE

Mailing Address 705 MEADOW STREAM DR

City State Zip Code
SOUTH BEND IN 46614-6838

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13961004

Amount of Each Receipt this Period
80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 441.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 696 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. DAVID FONTENOT

Mailing Address 1153 S BAYOUWOOD DR

City State Zip Code
LAKE CHARLES LA 70605-3345

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
4 P PLANNING PLANNER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 725.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952680

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. DAVID FONTENOT

Mailing Address 1153 S BAYOUWOOD DR

City State Zip Code
LAKE CHARLES LA 70605-3345

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
4 P PLANNING PLANNER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 725.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13972945

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
ANTOINETTE FORAND

Mailing Address 14 OLD MILL DR.

City State Zip Code
DENVERVILLE NJ 07834-9511

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 301.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933367

Amount of Each Receipt this Period

71.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

171.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 697 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
ANTOINETTE FORAND

Mailing Address 14 OLD MILL DR.

City State Zip Code
DENVERLE NJ 07834-9511

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 301.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959976

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. CHARLES D. FORAN

Mailing Address 11815 MEADOWSPRING LN

City State Zip Code
DALLAS TX 75218-1208

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED ENGINEER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954980

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DR. ANNE E. FORD

Mailing Address 733 LARCHWOOD DRIVE

City State Zip Code
BREA CA 92821-6451

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ST. JUDE MEDICAL GROUP PHYSICIAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 420.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955797

Amount of Each Receipt this Period

210.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

510.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 698 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CHARLES W. FORD

Mailing Address 16492 BARNSTABLE CIR.

City State Zip Code
HUNTINGTON BEACH CA 92649-2114

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 11000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946975

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. EILEEN FORD

Mailing Address 3662 IONIA ST.

City State Zip Code
SEAFORD NY 11783-3021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13938291

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ELDON FORD

Mailing Address 19 LA LITA LN

City State Zip Code
SANTA BARBARA CA 93105-1916

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961976

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **5150.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 699 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. HAROLD JACKSON FORD

Mailing Address 199 RAPER CIR.

City State Zip Code
LEXINGTON NC 27295-5821

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 301.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948303

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
JERRY FORD

Mailing Address 1777 ARDLEIGH RD

City State Zip Code
COLUMBUS OH 43221-1403

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 215.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962804

Amount of Each Receipt this Period

105.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JOE FORD

Mailing Address 2828 HOOD STREET
APARTMENT 1303

City State Zip Code
DALLAS TX 75219-7810

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956736

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

1255.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 700 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. NORMA M. FORD

Mailing Address 905 N. MILFORD LAKE ROAD

City State Zip Code
JUNCTION CITY KS 66441-8573

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
11 / 17 / 2010

Transaction ID: SA11.13969993

Amount of Each Receipt this Period
35.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. THOMAS FORD

Mailing Address 4900 SW 74TH CT

City State Zip Code
MIAMI FL 33155-4400

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BHAMANI,FORD&ASSOC INC ARCHITECT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
MM / DD / YYYY
10 / 20 / 2010

Transaction ID: SA11.13945118

Amount of Each Receipt this Period
35.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. THOMAS FORD

Mailing Address 4900 SW 74TH CT

City State Zip Code
MIAMI FL 33155-4400

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BHAMANI,FORD&ASSOC INC ARCHITECT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
MM / DD / YYYY
11 / 22 / 2010

Transaction ID: SA11.13973229

Amount of Each Receipt this Period
35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 105.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 701 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM R. FORD

Mailing Address 4028 NE COLLEGE ST

City AYDEN State NC Zip Code 28513-7124

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13933680
 Amount of Each Receipt this Period: 35.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM R. FORD

Mailing Address 4028 NE COLLEGE ST

City AYDEN State NC Zip Code 28513-7124

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt: 10 / 29 / 2010
Transaction ID: SA11.13961494
 Amount of Each Receipt this Period: 35.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. GERALD L. FORET

Mailing Address 43011 VICTORY DRIVE

City FRANKLINTON State LA Zip Code 70438-5129

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13933437
 Amount of Each Receipt this Period: 100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 170.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 702 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES W. FORINASH

Mailing Address 212 LINDEN
P.O. BOX 37

City IRONDALE State MO Zip Code 63648-0037

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 430.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13946624
Amount of Each Receipt this Period: 45.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MARY L. FORMATO

Mailing Address 77 7TH AVENUE APT 21C

City NEW YORK State NY Zip Code 10011-6644

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13933261
Amount of Each Receipt this Period: 101.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ANTHONY V. FORMISANO

Mailing Address 32 ROCKLAND PLACE

City NEW ROCHELLE State NY Zip Code 10801-2027

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13940623
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 196.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 703 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ANTHONY V. FORMISANO

Mailing Address 32 ROCKLAND PLACE

City State Zip Code
NEW ROCHELLE NY 10801-2027

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt
MM / DD / YYYY
10 / 28 / 2010

Transaction ID: SA11.13960111

Amount of Each Receipt this Period
51.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
HAROLD E. FORSEE

Mailing Address 5415 BAZZANELLA DR.

City State Zip Code
MINERAL VA 23117-5040

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
MM / DD / YYYY
11 / 03 / 2010

Transaction ID: SA11.13965310

Amount of Each Receipt this Period
75.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. WILLIAM N. FORSSTROM

Mailing Address 1710 EMERALD GLADE LN

City State Zip Code
CINCINNATI OH 45255-5101

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2010

Transaction ID: SA11.13951569

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 226.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 704 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. DOROTHY C. FORSTER

Mailing Address 1220 WEST ST

City State Zip Code
ROSENBERG TX 77471-3154

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 415.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13964057

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAVE V. FORTHUN

Mailing Address PO BOX 94

City State Zip Code
MINOT ND 58702-0094

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MINOT RESTURANT SUPPLY OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2010

Transaction ID: SA11.13965166

Amount of Each Receipt this Period
35.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. THAD FOSGITT

Mailing Address 978 N. BAKER RD.

City State Zip Code
WELLSTON MI 49689-9707

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 435.00

Date of Receipt
MM / DD / YYYY
10 / 27 / 2010

Transaction ID: SA11.13955842

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 175.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 705 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ALBERT W. FOSTER

Mailing Address 20451 AUDETTE ST

City State Zip Code
DEARBORN MI 48124-3907

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948309

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DENICE FOUNTAIN

Mailing Address 1010 NW BELL AVE

City State Zip Code
LAWTON OK 73507-6647

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949418

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. SHARON FOUST

Mailing Address 122 E 2ND ST

City State Zip Code
MINNEAPOLIS KS 67467-2402

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FOUST IMAGING BEAUTY CUNSLTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13969488

Amount of Each Receipt this Period
45.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **195.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 706 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. JOHN N. FOWLER		Date of Receipt
	Mailing Address 4800 LAKEWOOD DR		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 2 / 2 0 1 0
	City	State	Zip Code
	METAIRIE	LA	70002-1371
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13948917
Name of Employer ENGINEERING DYNAMICS INC		Occupation ENGINEER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 300.00
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) THOMAS FOWLER		Date of Receipt
	Mailing Address 2708 ELM AVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 1 / 0 2 / 2 0 1 0
	City	State	Zip Code
	MANHATTAN BEACH	CA	90266-2426
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13964640
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 200.00
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) BETTY J. FOX		Date of Receipt
	Mailing Address 11 SUMMERHILL CIRCLE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 1 4 / 2 0 1 0
	City	State	Zip Code
	CABOT	AR	72023-8619
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13930444
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 25.00
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 525.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 707 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
BETTY J. FOX

Mailing Address 11 SUMMERHILL CIRCLE

City State Zip Code
CABOT AR 72023-8619

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	1	0

Transaction ID: SA11.13946584

Amount of Each Receipt this Period
20.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. EDNA R. FOX

Mailing Address 4655 VICTORIA ST N APT 211

City State Zip Code
SAINT PAUL MN 55126-5889

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13954578

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. PEGGY FOX

Mailing Address 525 W BACA STREET

City State Zip Code
TRINIDAD CO 81082-1406

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	1	0

Transaction ID: SA11.13948603

Amount of Each Receipt this Period
60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **130.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 708 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
AMBASSADOR SAM FOX

Mailing Address 7701 FORSYTH BOULEVARD
SUITE 600

City State Zip Code
SAINT LOUIS MO 63105-1875

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
8000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13942514

Amount of Each Receipt this Period
8000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LISA FRAGA, M.D.

Mailing Address 526 ROUND HOLLOW LN

City State Zip Code
SOUTHLAKE TX 76092-2219

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950562

Amount of Each Receipt this Period
150.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. RONALD G. FRAGGE

Mailing Address 1923 FORTSIDE CIRCLE

City State Zip Code
FT. MITCHELL KY 41011-1846

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
301.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933024

Amount of Each Receipt this Period
101.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **8251.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 709 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DR. RONALD G. FRAGGE	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 1923 FORTSIDE CIRCLE	Transaction ID: SA11.13952965
	City State Zip Code FT. MITCHELL KY 41011-1846	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation SELF-EMPLOYED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00	

B.	Full Name (Last, First, Middle Initial) HARRISON S. FRAKER	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 1 GARDENER CT	Transaction ID: SA11.13947766
	City State Zip Code NANTUCKET MA 02554-3822	Amount of Each Receipt this Period 120.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) MS. NANCY L. FRANCE	Date of Receipt MM / DD / YYYY 11 / 19 / 2010
	Mailing Address 137 COLGAN AVE APT 2061	Transaction ID: SA11.13970046
	City State Zip Code SANTA ROSA CA 95404-7407	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

SUBTOTAL of Receipts This Page (optional) ▶

320.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 710 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. BARBARA HACKMAN FRANKLIN

Mailing Address 2600 VIRGINIA AVENUE, NW
SUITE 506

City State Zip Code
WASHINGTON DC 20037-1946

FEC ID number of contributing federal political committee. **C**

Name of Employer
BARBARA FRANKLIN ENTERPRISES

Occupation
PRESIDENT/CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959405

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. CARL R. FRANK

Mailing Address 1776 K ST. NW

City State Zip Code
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C**

Name of Employer
WILEY REIN AND FIELDING

Occupation
ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13964395

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. GEORGE G. FRANKLIN

Mailing Address 225 PARKING WAY

City State Zip Code
LAKE JACKSON TX 77566-5226

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955849

Amount of Each Receipt this Period

160.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1410.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 711 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. GEORGE G. FRANKLIN	Date of Receipt MM / DD / YYYY 11 / 04 / 2010
	Mailing Address 225 PARKING WAY	Transaction ID: SA11.13965611
	City State Zip Code LAKE JACKSON TX 77566-5226	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

B.	Full Name (Last, First, Middle Initial) MR. WARREN E. FRANK	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 43575 BLAKE CREEK RD	Transaction ID: SA11.13956612
	City State Zip Code LEONARDTOWN MD 20650-6047	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	

C.	Full Name (Last, First, Middle Initial) MR. ALAN P. FRANTZEN	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 174 PERHAM ST	Transaction ID: SA11.13947521
	City State Zip Code WEST ROXBURY MA 02132-3255	Amount of Each Receipt this Period 95.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer STATE STREET BANK	Occupation TAX ASSOCIATE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 355.00	

SUBTOTAL of Receipts This Page (optional)	345.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 712 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DENNY FRARY

Mailing Address 24 E 2ND ST

City State Zip Code
PROPHETSTOWN IL 61277

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13937652

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. STUART A. FRASER

Mailing Address 18 MAPLE WAY

City State Zip Code
ARMONK NY 10504-2601

FEC ID number of contributing federal political committee. **C**

Name of Employer CANTOR FITZGERALD LLP
Occupation FINANCIAL SERVICES EXEC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	9	/	2	0	1	0

Transaction ID: SA11.13959411

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. STUART A. FRASER

Mailing Address 18 MAPLE WAY

City State Zip Code
ARMONK NY 10504-2601

FEC ID number of contributing federal political committee. **C**

Name of Employer CANTOR FITZGERALD LLP
Occupation FINANCIAL SERVICES EXEC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	9	/	2	0	1	0

Transaction ID: SA11.13959412

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **10050.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 713 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) RONALD N. FRAZAR		Date of Receipt
	Mailing Address P.O. BOX 4970		<input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	WHITEFISH	MT	59937-4970
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13930213
		Amount of Each Receipt this Period	
		<input type="text" value="151.00"/>	
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="251.00"/>	

B.	Full Name (Last, First, Middle Initial) MR. LAWRENCE FRAZIER		Date of Receipt
	Mailing Address 15209 MAPLE CT		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	OVERLAND PARK	KS	66223-3244
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13938161
		Amount of Each Receipt this Period	
		<input type="text" value="60.00"/>	
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="210.00"/>	

C.	Full Name (Last, First, Middle Initial) MR. KEITH I. FREDERICK		Date of Receipt
	Mailing Address 11250 KENTUCKY RD.		<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	PAPILLION	NE	68133-2322
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13949112
		Amount of Each Receipt this Period	
		<input type="text" value="50.00"/>	
Name of Employer RETIRED		Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="290.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="261.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 714 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL D. FREDERICK

Mailing Address 51 S PARK LN

City State Zip Code
DUNCANSVILLE PA 16635-4567

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
370.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 19 / 2010

Transaction ID: SA11.13931942

Amount of Each Receipt this Period
150.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. JOSEPHINE W. FREEDE

Mailing Address 316 NW 39TH STREET

City State Zip Code
OKLAHOMA CITY OK 73118-8414

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER
Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2010

Transaction ID: SA11.13961170

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
P D. FREEDLE

Mailing Address 35 W SPANISH MAIN ST.

City State Zip Code
TAMPA FL 33609-3534

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED
Occupation INVESTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 25 / 2010

Transaction ID: SA11.13952693

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **2850.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 715 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ANDREW R. FREEMAN

Mailing Address **4600 CHEVY CHASE BLVD.**

City **CHEVY CHASE** State **MD** Zip Code **20815-5301**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **515.00**

Date of Receipt **10 / 21 / 2010**

Transaction ID: SA11.13947078

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
COL. DAN W. FREEMAN

Mailing Address **3556 VIA LOMA VISTA**

City **ESCONDIDO** State **CA** Zip Code **92029-7728**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **10 / 19 / 2010**

Transaction ID: SA11.13940804

Amount of Each Receipt this Period **60.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ERNEST H. FREEMAN

Mailing Address **6434 W. 82ND PLACE**

City **BURBANK** State **IL** Zip Code **60459-1716**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **10 / 22 / 2010**

Transaction ID: SA11.13949819

Amount of Each Receipt this Period **50.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **210.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 716 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
NANCY E. FREEMAN

Mailing Address 6 S SUMMER CLOUD DR.

City State Zip Code
SPRING TX 77381-6226

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954051

Amount of Each Receipt this Period

90.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
SUE P. FREEZE

Mailing Address 2208 ASHWOOD LN. NW

City State Zip Code
CULLMAN AL 35058-1619

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 251.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954863

Amount of Each Receipt this Period

75.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. JEFFEREY E. FRICK

Mailing Address 8003 PASEO ESMERADO

City State Zip Code
CARLSBAD CA 92009-9805

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 675.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959086

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

365.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 717 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. HEINZ K. FRIDRICH

Mailing Address 131 LONG POINT DR.

City State Zip Code
FERNANDINA FL 32034-6410

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 236.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932765

Amount of Each Receipt this Period

26.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
BARRY FRIEDBERG

Mailing Address 134 E 71ST. ST.

City State Zip Code
NEW YORK NY 10021-5011

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FRIEDHAM MALATK INVESTOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959467

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. JOAN FRIEDGEN

Mailing Address 5685 LAKE MURRAY BLVD UNIT D

City State Zip Code
LA MESA CA 91942-1901

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 1 0

Transaction ID: SA11.13966925

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

276.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 718 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. JOAN FRIEDGEN

Mailing Address 5685 LAKE MURRAY BLVD UNIT D

City State Zip Code
LA MESA CA 91942-1901

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	8	/	2	0	1	0

Transaction ID: SA11.13971397

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LEE FRIEDRICHSEN

Mailing Address 4006 COAPITES STREET

City State Zip Code
PASADENA TX 77504-3530

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	1	0

Transaction ID: SA11.13949257

Amount of Each Receipt this Period
110.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. SUSAN FRIEDMAN

Mailing Address 615 SANTA MARIA STREET

City State Zip Code
SUGAR LAND TX 77478-3333

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	9	/	2	0	1	0

Transaction ID: SA11.13961234

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1160.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 719 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM D. FRIEDRICH

Mailing Address 1553 ENSENADA DRIVE

City State Zip Code
ORLANDO FL 32825-8345

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13964227

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. STEVEN A. FRIENDSHUH

Mailing Address P.O. BOX 432

City State Zip Code
SAVAGE MN 55378-0432

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 341.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944450

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. STEVEN A. FRIENDSHUH

Mailing Address P.O. BOX 432

City State Zip Code
SAVAGE MN 55378-0432

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 341.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953820

Amount of Each Receipt this Period
1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **126.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 720 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. GERALDINE FRIES

Mailing Address 1860 S MINNEWAWA AVE

City FRESNO State CA Zip Code 93727-6036

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 449.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13941924
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. EUNICE E. FRISKE

Mailing Address 2310 S. 11TH AVE.

City BROADVIEW State IL Zip Code 60155-4034

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13941546
Amount of Each Receipt this Period: 75.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. EUNICE E. FRISKE

Mailing Address 2310 S. 11TH AVE.

City BROADVIEW State IL Zip Code 60155-4034

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13941878
Amount of Each Receipt this Period: 75.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 250.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 721 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. ROSEMARIE R. FRITZ

Mailing Address 37 WINDEMERE PKWY.

City PHOENIX State MD Zip Code 21131-2423

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13953631
 Amount of Each Receipt this Period: 16.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. ROSEMARIE R. FRITZ

Mailing Address 37 WINDEMERE PKWY.

City PHOENIX State MD Zip Code 21131-2423

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt: 10 / 27 / 2010
Transaction ID: SA11.13958694
 Amount of Each Receipt this Period: 20.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. WELLUM P. FRIVOLD

Mailing Address P.O. BOX 11207

City SAN RAFAEL State CA Zip Code 94912-1207

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13935180
 Amount of Each Receipt this Period: 100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 136.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 722 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JEANETTE FROELICH

Mailing Address 220 PAISANO DR.

City State Zip Code
VICTORIA TX 77904-3790

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956473

Amount of Each Receipt this Period
55.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. HAROLD E. FROMM

Mailing Address 314 N BERRY PINE RD

City State Zip Code
RAPID CITY SD 57702-1859

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13972825

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. MARGARET JANE FRONCZAK

Mailing Address 2769 N. INDIAN HEIGHTS DRIVE

City State Zip Code
OREGON IL 61061-9250

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 257.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13972815

Amount of Each Receipt this Period
115.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **670.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 723 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOHN J. FRONING

Mailing Address 4044 LONE WOLF CIR

City State Zip Code
CROSSVILLE TN 38572-6565

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 406.44

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13969998

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. THOMAS D. FROOM

Mailing Address 1909 PAISLEY DR

City State Zip Code
ARLINGTON TX 76015-2818

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938686

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. ELIZABETH FROSTAD

Mailing Address 1589 SILVER LAKE RD

City State Zip Code
OAK HARBOR WA 98277-9050

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 355.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928947

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 190.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 724 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. ARDIS N. FRY

Mailing Address 1614 E BLUFF ST

City State Zip Code
GARDEN CITY KS 67846-3507

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FRY EYE ASSOC. NURSE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	2	/	2	0	1	0

Transaction ID: SA11.13962649

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. JULIA E. FRY

Mailing Address 998 21 1/2 ROAD

City State Zip Code
GRAND JUNCTION CO 81505-9302

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 310.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	9	/	2	0	1	0

Transaction ID: SA11.13967453

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN P. FRYKLUND

Mailing Address 16805 ASTERBILT LN.

City State Zip Code
LAKEVILLE MN 55044-6055

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 360.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	1	0

Transaction ID: SA11.13945378

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **440.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 725 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. SAMUEL R. FUJIMOTO

Mailing Address 16000 S. BROADWAY ST.

City State Zip Code
GARDENA CA 90248-2408

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949874

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. PAT FOX FULGHAM

Mailing Address 3707 COPPERWOOD DRIVE

City State Zip Code
RICHARDSON TX 75082-2426

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13951113

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. HELEN V. FULLBRIGHT

Mailing Address 196 TURNPIKE ROAD

City State Zip Code
BREVARD NC 28712-4701

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 742.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13938309

Amount of Each Receipt this Period
30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1030.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 726 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. HELEN V. FULLBRIGHT

Mailing Address 196 TURNPIKE ROAD

City State Zip Code
BREVARD NC 28712-4701

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 742.50

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13942103

Amount of Each Receipt this Period
45.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. HELEN V. FULLBRIGHT

Mailing Address 196 TURNPIKE ROAD

City State Zip Code
BREVARD NC 28712-4701

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 742.50

Date of Receipt
MM / DD / YYYY
11 / 19 / 2010

Transaction ID: SA11.13972222

Amount of Each Receipt this Period
30.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. HELEN V. FULLBRIGHT

Mailing Address 196 TURNPIKE ROAD

City State Zip Code
BREVARD NC 28712-4701

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 742.50

Date of Receipt
MM / DD / YYYY
11 / 19 / 2010

Transaction ID: SA11.13972223

Amount of Each Receipt this Period
45.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 120.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 727 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
BRADLEY FULLER

Mailing Address 2 HANNAH DODGE RD UNIT A

City State Zip Code
LITTLETON MA 01460-6244

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 290.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13947912

Amount of Each Receipt this Period

40.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. DENNIS E. FULLER

Mailing Address 133 BLACKHAWK CLUB CT

City State Zip Code
DANVILLE CA 94506-4513

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956251

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. GORDON R. FULLER

Mailing Address 981 CENTRAL AVE

City State Zip Code
PLAINFIELD NJ 07060-2343

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MARSH TOWN VICE PRESIDENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 290.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931528

Amount of Each Receipt this Period

40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

330.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 728 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. JOBYNA FULLER		Date of Receipt
	Mailing Address 383 PLAYER CEMETERY RD.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 0 1 / 2 0 1 0
	City	State	Zip Code
	FITZGERALD	GA	31750-7230
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13964243
		Amount of Each Receipt this Period	
		<input type="text"/> 30.00	
Name of Employer HOMEMAKER		Occupation HOMEMAKER	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 241.00	

B.	Full Name (Last, First, Middle Initial) MR. JOHN FULLERTON		Date of Receipt
	Mailing Address 1407 INDIAN TRL		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	City	State	Zip Code
	SALADO	TX	76571-5492
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13953353
		Amount of Each Receipt this Period	
		<input type="text"/> 200.00	
Name of Employer US GOVT		Occupation SURGEON	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 500.00	

C.	Full Name (Last, First, Middle Initial) MR. JOHN R. FULLER		Date of Receipt
	Mailing Address 2020 WASHINGTON AVENUE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	City	State	Zip Code
	PLOVER	WI	54467-2868
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13962545
		Amount of Each Receipt this Period	
		<input type="text"/> 100.00	
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 310.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 330.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 729 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
STEVEN FULLMER

Mailing Address P.O. BOX 58

City State Zip Code
GRAVETTE AR 72736-0058

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EMPIRE DISTRICT ELECTRIC CO. DISTRIBUTION CONSTRUCTION DESIGNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918415

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT FULTON

Mailing Address 12671 OAK BEND DR

City State Zip Code
FORT MYERS FL 33905-5839

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 361.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943907

Amount of Each Receipt this Period
101.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. BERNARD G. FULTZ

Mailing Address 10360 COUNTY HIGHWAY 20

City State Zip Code
TRACY MN 56175-1813

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953489

Amount of Each Receipt this Period
75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **226.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 730 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. MAXINE FULTZ

Mailing Address 2103 71ST ST

City State Zip Code
LUBBOCK TX 79412-3833

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13962150

Amount of Each Receipt this Period

20.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. VICTOR FUMOSO

Mailing Address 3045 ROBERTS AVE

City State Zip Code
BRONX NY 10461-5110

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1150.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937292

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. VICTOR FUMOSO

Mailing Address 3045 ROBERTS AVE

City State Zip Code
BRONX NY 10461-5110

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1150.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954237

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

320.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 731 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. STEVE DARRELL FUNK

Mailing Address 69262 640TH ST

City State Zip Code
GRISWOLD IA 51535-6654

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 246.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13939718
Amount of Each Receipt this Period: 26.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WANDA FUNK

Mailing Address 1601 MERRIMAN AVE

City State Zip Code
CRP CHRISTI TX 78412-5407

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13939448
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WANDA FUNK

Mailing Address 1601 MERRIMAN AVE

City State Zip Code
CRP CHRISTI TX 78412-5407

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 10 / 28 / 2010
Transaction ID: SA11.13959783
Amount of Each Receipt this Period: 20.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 86.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 732 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. NANCY L. FUREBY

Mailing Address 4822 BLAYDON RD.

City State Zip Code
ROCKLIN CA 95765-5029

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 291.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932948

Amount of Each Receipt this Period
11.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. NANCY L. FUREBY

Mailing Address 4822 BLAYDON RD.

City State Zip Code
ROCKLIN CA 95765-5029

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 291.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936226

Amount of Each Receipt this Period
10.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. NANCY L. FUREBY

Mailing Address 4822 BLAYDON RD.

City State Zip Code
ROCKLIN CA 95765-5029

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 291.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949741

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **121.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 733 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. CHARLES FURR	Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address 172 WHITE OAK RD	Transaction ID: SA11.13963561
	City State Zip Code QUITMAN LA 71268-1227	Amount of Each Receipt this Period 26.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 366.00	

B.	Full Name (Last, First, Middle Initial) PAUL M. FURUKAWA	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 16727 RICKENBACKER CIR	Transaction ID: SA11.13939061
	City State Zip Code RIVERSIDE CA 92518-2913	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

C.	Full Name (Last, First, Middle Initial) DR. MICHAEL G. FUTRELL	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 8001 YOUREE DR SUITE 740	Transaction ID: SA11.13930480
	City State Zip Code SHREVEPORT LA 71115-2304	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SELF-EMPLOYED DOCTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	1101.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 734 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
CARL J. GAFFOGLIO

Mailing Address 3318 CANDLEKNOLL DR

City State Zip Code
SPRING TX 77388-5818

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
351.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948568

Amount of Each Receipt this Period

101.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. KATHARINE D. GAHAGAN

Mailing Address 601 SMITHS BRIDGE ROAD

City State Zip Code
WILMINGTON DE 19807-1323

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956864

Amount of Each Receipt this Period

300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. DANIEL GALLAGHER

Mailing Address 414 WOODLAWN ROAD

City State Zip Code
BALTIMORE MD 21210-2311

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WILMERHALE LAWYER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955992

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1401.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 735 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. WANDA GALLAGHER

Mailing Address 3098 COUNTY ROAD 213

City State Zip Code
CLYDE OH 43410-9572

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 21 / 2010

Transaction ID: SA11.13942807

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
M GALLUP

Mailing Address 10511 W 70TH TER APT 201

City State Zip Code
SHAWNEE KS 66203-4162

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 19 / 2010

Transaction ID: SA11.13932185

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
M GALLUP

Mailing Address 10511 W 70TH TER APT 201

City State Zip Code
SHAWNEE KS 66203-4162

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2010

Transaction ID: SA11.13959566

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 120.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 736 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. MARY ANN GALLUCCI

Mailing Address 830 TANGLEWOOD DR NE

City MASSILLON State OH Zip Code 44646-5008

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13928902
 Amount of Each Receipt this Period: 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MEARL GALLUP

Mailing Address 1311 S GLEBE RD

City ARLINGTON State VA Zip Code 22204-4340

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA11.13928042
 Amount of Each Receipt this Period: 110.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. LIANE R. GALVIN

Mailing Address 1980 OAK STREET

City NORTH BEND State OR Zip Code 97459-2021

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13946548
 Amount of Each Receipt this Period: 25.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 185.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 737 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. GALO GAMARRA
Mailing Address 186 ELENA CT.

City State Zip Code
JUPITER FL 33478-5403

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 341.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13938834

Amount of Each Receipt this Period
21.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
JUDITH GAMBEE
Mailing Address 1811 E. MAIN STREET

City State Zip Code
MEDFORD OR 97504-7626

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13955651

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
STEPHEN GAMBEE
Mailing Address 8001 TABLE ROCK ROAD

City State Zip Code
WHITE CITY OR 97503-1021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ROGUE WASTE SYSTEMS, LLC MANAGER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13962485

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10021.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 738 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. DAVID P. GAMBLE	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 2700 POLO LANE	Transaction ID: SA11.13948205
	City State Zip Code PLANO TX 75093-4774	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation PPG INVESTMENTS LLC INVESTMENT ADVISOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) LINCOLN GAMBLE	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 11100 QUAIL CREST ST	Transaction ID: SA11.13940853
	City State Zip Code FORT SMITH AR 72916-9157	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SELF-EMPLOYED FARMER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) GILLIS GAMMACK, III	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 270 PARDUE DR.	Transaction ID: SA11.13948733
	City State Zip Code VALLEY GRANDE AL 36701-3774	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional)	▶	1250.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 739 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. HELEN R. GAMMEL

Mailing Address 3 WIGGAND DR.

City State Zip Code
GLENMONT NY 12077-4430

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935476

Amount of Each Receipt this Period
70.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. NICHOLAS J. GANEM

Mailing Address 4722 W CREEDANCE BLVD

City State Zip Code
GLENDALE AZ 85310-3841

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
METRO MECHANICAL MECHANICAL CONTRACTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948892

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
KATHERINE L. GANN

Mailing Address 2349 S OLIVEWOOD

City State Zip Code
MESA AZ 85209-1363

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931664

Amount of Each Receipt this Period
75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **245.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 740 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. HOLGER B. GANTZ

Mailing Address 3754 DARLINGTON CT.

City State Zip Code
SANTA ROSA CA 95404-7629

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963129

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DAVID GANZ

Mailing Address 77 WELLESLEY RD.

City State Zip Code
BELMONT MA 02478-2123

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
580.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928999

Amount of Each Receipt this Period
220.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. CHERIE V. GANZER

Mailing Address 11380 FUERTE DRIVE

City State Zip Code
EL CAJON CA 92020-8218

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
303.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930601

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **370.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 741 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. CHERIE V. GANZER

Mailing Address 11380 FUERTE DRIVE

City State Zip Code
EL CAJON CA 92020-8218

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 303.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930928

Amount of Each Receipt this Period

1.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. WALTER GANZI

Mailing Address 8171 BAY COLONY DRIVE, #1902

City State Zip Code
NAPLES FL 34108-7567

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
THE PALM RESTAURANT CO-CHAIRMAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959406

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
STEVEN GARAVAGLIA

Mailing Address 1111 BEACON STREET APT 51

City State Zip Code
BROOKLINE MA 02446-5520

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 775.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 1 0

Transaction ID: SA11.13947650

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5101.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 742 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. KAREN A. GARBERS
Mailing Address P.O. BOX 182
City ATKINS State IA Zip Code 52206-0182
FEC ID number of contributing federal political committee. **C**
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 291.00
Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13941608
Amount of Each Receipt this Period 101.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. ALEXIS GARCIA
Mailing Address 3700 SW 104TH AVE
City MIAMI State FL Zip Code 33165-3709
FEC ID number of contributing federal political committee. **C**
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFO REQUESTED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 241.00
Date of Receipt 10 / 26 / 2010
Transaction ID: SA11.13951465
Amount of Each Receipt this Period 50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. ELOISA SANTIBANEZ GARCIA
Mailing Address 214 KEYSTONE
City RIVER FOREST State IL Zip Code 60305-2022
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED
Occupation ORTHODONTIST
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 850.00
Date of Receipt 10 / 25 / 2010
Transaction ID: SA11.13948160
Amount of Each Receipt this Period 200.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 351.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 743 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. NORMAN L. GARCIA		Date of Receipt
	Mailing Address 924 E AGAPE AVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	SAN JACINTO	CA	92583-5416
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13948663
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Amount of Each Receipt this Period	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 30.00	
Occupation INFORMATION REQUESTED PER BEST EFFORTS		CONTRIBUTION	
Aggregate Year-to-Date ▼		<input type="text"/> 310.00	

B.	Full Name (Last, First, Middle Initial) MR. NORMAN L. GARCIA		Date of Receipt
	Mailing Address 924 E AGAPE AVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	SAN JACINTO	CA	92583-5416
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13949134
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Amount of Each Receipt this Period	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 20.00	
Occupation INFORMATION REQUESTED PER BEST EFFORTS		CONTRIBUTION	
Aggregate Year-to-Date ▼		<input type="text"/> 310.00	

C.	Full Name (Last, First, Middle Initial) SELIA C. GARCIA		Date of Receipt
	Mailing Address 10463 HIGHWAY 36 N		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	BELLVILLE	TX	77418-5333
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13950908
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Amount of Each Receipt this Period	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 70.00	
Occupation INFORMATION REQUESTED PER BEST EFFORTS		CONTRIBUTION	
Aggregate Year-to-Date ▼		<input type="text"/> 250.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 120.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 744 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. DELPHA G. GARD

Mailing Address 9 HOSPITAL DR APT 221
APARTMENT 221

City State Zip Code
CANYON TX 79015-3100

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 261.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953560

Amount of Each Receipt this Period
51.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
STEVE GARDES

Mailing Address 108 LAKESIDE DR

City State Zip Code
LAFAYETTE LA 70508-7012

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DARNALL, SIKES, GARDES, AND FREDERICK CPA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958416

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. CAROLYN J. GARDNER

Mailing Address 4415 WILDWOOD RD.

City State Zip Code
MEMPHIS TN 38135-1042

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945317

Amount of Each Receipt this Period
35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 186.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 745 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MR. ED E. GARDNER</p> <p>Mailing Address 801 GILLASPIE DR. APT. 270</p> <p>City State Zip Code BOULDER CO 80305-6552</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 411.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 18 / 2010</p> <p>Transaction ID: SA11.13933255</p> <p>Amount of Each Receipt this Period 151.00</p> <p>CONTRIBUTION</p>
--	--

<p>B. Full Name (Last, First, Middle Initial) MR. ED E. GARDNER</p> <p>Mailing Address 801 GILLASPIE DR. APT. 270</p> <p>City State Zip Code BOULDER CO 80305-6552</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 411.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 19 / 2010</p> <p>Transaction ID: SA11.13941184</p> <p>Amount of Each Receipt this Period 35.00</p> <p>CONTRIBUTION</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) MS. NANCY GARDNER</p> <p>Mailing Address 425 FERRY LANE</p> <p>City State Zip Code CHURUBUSCO IN 46723-1301</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RYAN CARDIOLOGY NURSE PRACTITIONER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 255.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 11 / 01 / 2010</p> <p>Transaction ID: SA11.13964264</p> <p>Amount of Each Receipt this Period 50.00</p> <p>CONTRIBUTION</p>
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SUBTOTAL of Receipts This Page (optional)	236.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 746 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
CATHY GARMS

Mailing Address 26302 JUDY CIR

City State Zip Code
ROMULUS MI 48174-9431

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932774

Amount of Each Receipt this Period
1.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CATHY GARMS

Mailing Address 26302 JUDY CIR

City State Zip Code
ROMULUS MI 48174-9431

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933395

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CATHY GARMS

Mailing Address 26302 JUDY CIR

City State Zip Code
ROMULUS MI 48174-9431

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13948133

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **91.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 747 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CHARLES W. GARNER

Mailing Address 1107 N CENTRAL AVE

City State Zip Code
ALEXANDRIA IN 46001-9491

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	1	0

Transaction ID: SA11.13944175

Amount of Each Receipt this Period

30.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DANNY L. GARNER

Mailing Address 1778 COUNTY ROAD 1790 E

City State Zip Code
CROSSVILLE IL 62827-2415

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	1	0

Transaction ID: SA11.13959828

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. ROSEANNE GARNSEY

Mailing Address 1926 23RD AVE

City State Zip Code
GREELEY CO 80634-6019

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13955222

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

280.00

TOTAL This Period (last page this line number only) ►

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 748 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. ROSEANNE GARNSEY

Mailing Address 1926 23RD AVE

City State Zip Code
GREELEY CO 80634-6019

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13964092

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. KAY M. GARRARD

Mailing Address 334 TEX ST.

City State Zip Code
MESQUITE NV 89027-4104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 573.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935726

Amount of Each Receipt this Period

20.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. KAY M. GARRARD

Mailing Address 334 TEX ST.

City State Zip Code
MESQUITE NV 89027-4104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 573.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944421

Amount of Each Receipt this Period

15.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

85.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 749 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. KAY M. GARRARD

Mailing Address 334 TEX ST.

City MESQUITE State NV Zip Code 89027-4104

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 573.00

Date of Receipt: 10 / 28 / 2010
Transaction ID: SA11.13959645
 Amount of Each Receipt this Period: 25.00
CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. KAY M. GARRARD

Mailing Address 334 TEX ST.

City MESQUITE State NV Zip Code 89027-4104

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 573.00

Date of Receipt: 11 / 22 / 2010
Transaction ID: SA11.13972749
 Amount of Each Receipt this Period: 10.00
CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. HELEN W. GARRETT

Mailing Address 306 OLD OAK RD.

City HENRICO State VA Zip Code 23229-7536

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 831.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13933195
 Amount of Each Receipt this Period: 681.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 716.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 750 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
LAWRENCE GARRETT

Mailing Address 1881 N NASH ST, UNIT 1211

City State Zip Code
ARLINGTON VA 22209-1568

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ERNST & YOUNG ATTORNEY

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13932241

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
THE HONORA SCOTT GARRETT

Mailing Address 93 SPRING STREET

City State Zip Code
NEWTON NJ 07860-2069

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 4 / 2 0 1 0

Transaction ID: SA11.13965641

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. BEN L. GARRIS

Mailing Address 15416 LA. HWY 10

City State Zip Code
ST FRANCISVILLE LA 70775-4753

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 750.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 1 0

Transaction ID: SA11.13972037

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1050.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 751 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
BRUCE GARRISON

Mailing Address 7 NOEL DR.

City State Zip Code
OSSINING NY 10562-5301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 700.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940961

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DAN GARRISON

Mailing Address P.O. BOX 605

City State Zip Code
SALEM UT 84653-0605

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955147

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. ELISABETH W. GARRISON

Mailing Address 6300 CARMEL FALLS CT

City State Zip Code
MCKINNEY TX 75070-8768

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 1 0

Transaction ID: SA11.13970020

Amount of Each Receipt this Period

210.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

410.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 752 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. LORI B. GARRIS

Mailing Address 159 CHESTNUT HILL RD

City State Zip Code
LITCHFIELD CT 06759-4132

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951542

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. MARJORIE L. GARTLAND

Mailing Address 55 E TRILLIUM CIR

City State Zip Code
SPRING TX 77381-6003

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
216.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941033

Amount of Each Receipt this Period

26.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
ADALBERTO GARZA

Mailing Address 210 SOUTH MAIN

City State Zip Code
DONNA TX 78537-3249

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931796

Amount of Each Receipt this Period

85.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

211.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 753 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. LUDA GASHENKO

Mailing Address 2247 SORBUS WAY

City ANCHORAGE State AK Zip Code 99508-4051

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt: 11 / 08 / 2010
Transaction ID: SA11.13966692
 Amount of Each Receipt this Period: 100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. LUDA GASHENKO

Mailing Address 2247 SORBUS WAY

City ANCHORAGE State AK Zip Code 99508-4051

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt: 11 / 09 / 2010
Transaction ID: SA11.13967268
 Amount of Each Receipt this Period: 100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. LUDA GASHENKO

Mailing Address 2247 SORBUS WAY

City ANCHORAGE State AK Zip Code 99508-4051

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt: 11 / 09 / 2010
Transaction ID: SA11.13967271
 Amount of Each Receipt this Period: 100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 300.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 754 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. BRUNO R. GASPARI

Mailing Address 7501 AGNEW AVE

City State Zip Code
LOS ANGELES CA 90045-1005

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	2	/	2	0	1	0

Transaction ID: SA11.13964621

Amount of Each Receipt this Period
75.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SANDRA GASPER

Mailing Address 535 E CAMINO REAL AVE

City State Zip Code
ARCADIA CA 91006-4347

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13952243

Amount of Each Receipt this Period
120.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. PATRICIA L. GASS

Mailing Address 1305 N HIGHLANDS PKWY APT E4

City State Zip Code
TACOMA WA 98406-2131

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	1	0

Transaction ID: SA11.13960524

Amount of Each Receipt this Period
30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **225.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 755 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. JOHN GASSAWAY

Mailing Address 1623 ADAMS LN

City State Zip Code
STARKVILLE MS 39759-8571

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation ORTHOPEDIC SURGEON

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	1	0

Transaction ID: SA11.13943699

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. VALERIE GAST

Mailing Address 245 GRACE DR

City State Zip Code
SOUTH PASADENA CA 91030-1820

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 455.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13954100

Amount of Each Receipt this Period
75.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. LOYD GASTINEAU

Mailing Address 3996 W COUNTY ROAD 675 N

City State Zip Code
FREETOWN IN 47235-9563

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 320.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	2	/	2	0	1	0

Transaction ID: SA11.13971783

Amount of Each Receipt this Period
80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **255.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 756 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DAVID R. GATES

Mailing Address 815 LANCASHIRE DR APT 11
APARTMENT 11

City State Zip Code
EDWARDSVILLE IL 62025-3859

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 223.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933941

Amount of Each Receipt this Period
10.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MAURICE P. GAUDET, III

Mailing Address 538 REDBUD LN.

City State Zip Code
SLIDELL LA 70460-5267

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
J&M INDUSTRIES INC PRESIDENT & C.E.O.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 405.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936094

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MAURICE P. GAUDET, III

Mailing Address 538 REDBUD LN.

City State Zip Code
SLIDELL LA 70460-5267

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
J&M INDUSTRIES INC PRESIDENT & C.E.O.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 405.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949731

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 85.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 757 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. LINDA S. GAUNTT

Mailing Address 203 EARLEY ST APT Q

City State Zip Code
HARDIN IL 62047-9620

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933184

Amount of Each Receipt this Period
6.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. EDGAR MURRAY GAY

Mailing Address 501 GREEN ACRES DR SW

City State Zip Code
HARTSELLE AL 35640-3846

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 761.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940568

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. EDGAR MURRAY GAY

Mailing Address 501 GREEN ACRES DR SW

City State Zip Code
HARTSELLE AL 35640-3846

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 761.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944250

Amount of Each Receipt this Period
30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 61.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 758 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. EDGAR MURRAY GAY

Mailing Address 501 GREEN ACRES DR SW

City State Zip Code
HARTSELLE AL 35640-3846

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 761.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13952174

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. EDGAR MURRAY GAY

Mailing Address 501 GREEN ACRES DR SW

City State Zip Code
HARTSELLE AL 35640-3846

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 761.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13963009

Amount of Each Receipt this Period
20.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DR. DONALD H. GAYLOR

Mailing Address 3761 DEVONSHIRE RD

City State Zip Code
ALLENTOWN PA 18103-9628

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 426.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13945677

Amount of Each Receipt this Period
1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **71.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 759 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. DONALD H. GAYLOR

Mailing Address 3761 DEVONSHIRE RD

City State Zip Code
ALLENTOWN PA 18103-9628

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 426.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946831

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. DONALD H. GAYLOR

Mailing Address 3761 DEVONSHIRE RD

City State Zip Code
ALLENTOWN PA 18103-9628

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 426.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963629

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. RUTH L. GEALY

Mailing Address 1978 690TH ROAD

City State Zip Code
GORDON NE 69343-4809

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 940.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944095

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 100.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 760 / 3187
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. RUTH L. GEALY

Mailing Address 1978 690TH ROAD

City State Zip Code
GORDON NE 69343-4809

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 940.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944153

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. RUTH L. GEALY

Mailing Address 1978 690TH ROAD

City State Zip Code
GORDON NE 69343-4809

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 940.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952701

Amount of Each Receipt this Period
85.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. RUTH L. GEALY

Mailing Address 1978 690TH ROAD

City State Zip Code
GORDON NE 69343-4809

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 940.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13969272

Amount of Each Receipt this Period
55.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 190.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 761 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
J. MICHAEL GEARON

Mailing Address 4476 WOODLAND BROOK DR

City ATLANTA State GA Zip Code 30339-5365

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation INVESTMENTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 09 / 2010

Transaction ID: SA11.13967191

Amount of Each Receipt this Period 250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KATHY GEDNALSKE

Mailing Address 12708 BICKERSTAFF DRIVE

City BAKERSFIELD State CA Zip Code 93311-8555

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt 10 / 18 / 2010

Transaction ID: SA11.13928949

Amount of Each Receipt this Period 100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. SAM GEDULDIG

Mailing Address 1519 PATHFINDER LANE

City MCLEAN State VA Zip Code 22101-3509

FEC ID number of contributing federal political committee. **C**

Name of Employer CLARK LYTTLE & GEDULDIG Occupation PARTNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 15 / 2010

Transaction ID: SA11.13932335

Amount of Each Receipt this Period 250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 600.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 762 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
JOHN PUNG GEE

Mailing Address 406 SUSAN LN.

City CONROE State TX Zip Code 77385-9076

FEC ID number of contributing federal political committee. **C**

Name of Employer I.V. ASSOCIATES Occupation PHARMACIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13941090
 Amount of Each Receipt this Period: 250.00
 CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
JOHN PUNG GEE

Mailing Address 406 SUSAN LN.

City CONROE State TX Zip Code 77385-9076

FEC ID number of contributing federal political committee. **C**

Name of Employer I.V. ASSOCIATES Occupation PHARMACIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 11 / 18 / 2010
Transaction ID: SA11.13971338
 Amount of Each Receipt this Period: 250.00
 CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. MARY L. GEE

Mailing Address 2661 TALLANT RD APT 528
APARTMENT 528

City SANTA BARBARA State CA Zip Code 93105-4819

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 202.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13933988
 Amount of Each Receipt this Period: 20.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **520.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 763 / 3187
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. MARY L. GEE

Mailing Address 2661 TALLANT RD APT 528
APARTMENT 528

City State Zip Code
SANTA BARBARA CA 93105-4819

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 202.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950765

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DALE GEER

Mailing Address 3756 GLENBROOK LN

City State Zip Code
OSHKOSH WI 54904-8517

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UNEMPLOYED UNEMPLOYED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 228.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949651

Amount of Each Receipt this Period
20.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DALE GEER

Mailing Address 3756 GLENBROOK LN

City State Zip Code
OSHKOSH WI 54904-8517

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UNEMPLOYED UNEMPLOYED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 228.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950931

Amount of Each Receipt this Period
30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 100.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 764 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) DALE GEER</p> <p>Mailing Address 3756 GLENBROOK LN</p> <p>City State Zip Code OSHKOSH WI 54904-8517</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation UNEMPLOYED UNEMPLOYED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 228.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0</p> <p>Transaction ID: SA11.13952394</p> <p>Amount of Each Receipt this Period 12.00</p> <p>CONTRIBUTION</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) MR. ELTON E. GEESLIN</p> <p>Mailing Address 118 WOODHAVEN COURT</p> <p>City State Zip Code RED OAK TX 75154-6008</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 290.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0</p> <p>Transaction ID: SA11.13959111</p> <p>Amount of Each Receipt this Period 20.00</p> <p>CONTRIBUTION</p>
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<p>C. Full Name (Last, First, Middle Initial) MR. THOMAS G. GEHRING</p> <p>Mailing Address 1534 17TH STREET SUITE 202</p> <p>City State Zip Code SANTA MONICA CA 90404-3453</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation THOMAS G. GEHRING & ASSOC. LAWYER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 5000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 1 0</p> <p>Transaction ID: SA11.13942509</p> <p>Amount of Each Receipt this Period 5000.00</p> <p>CONTRIBUTION</p>
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SUBTOTAL of Receipts This Page (optional)	5032.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 765 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) DR. JOHN E. GEIS, SR.</p> <p>Mailing Address 2195 TORREY GLN</p> <p>City State Zip Code ESCONDIDO CA 92026-1079</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation NEIGHBORHOOD HEALTHCARE DENTIST</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 19 / 2010</p> <p>Transaction ID: SA11.13940849</p> <p>Amount of Each Receipt this Period 20.00</p> <p>CONTRIBUTION</p>
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<p>B. Full Name (Last, First, Middle Initial) DR. JOHN E. GEIS, SR.</p> <p>Mailing Address 2195 TORREY GLN</p> <p>City State Zip Code ESCONDIDO CA 92026-1079</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation NEIGHBORHOOD HEALTHCARE DENTIST</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 25 / 2010</p> <p>Transaction ID: SA11.13954973</p> <p>Amount of Each Receipt this Period 20.00</p> <p>CONTRIBUTION</p>
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<p>C. Full Name (Last, First, Middle Initial) MR. GREGORY L. GEISER</p> <p>Mailing Address 212 MORNINGSIDE DRIVE</p> <p>City State Zip Code MANHATTAN BEACH CA 90266-6444</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation WEDGEWOOD ENTERPRISE CORP. PRESIDENT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 26000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 14 / 2010</p> <p>Transaction ID: SA11.13928410</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>CONTRIBUTION</p>
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SUBTOTAL of Receipts This Page (optional)	1040.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 766 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GREGORY L. GEISER

Mailing Address 212 MORNINGSIDE DRIVE

City State Zip Code
MANHATTAN BEACH CA 90266-6444

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WEDGEWOOD ENTERPRISE CORP. PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 26000.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13957946

Amount of Each Receipt this Period
25000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHN F. GEISER

Mailing Address 4231 RAWLINS ST APT 20

City State Zip Code
DALLAS TX 75219-2772

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2010

Transaction ID: SA11.13965646

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GERALD L. GEISLER

Mailing Address 1697 POWDERHORN DR

City State Zip Code
NEWTOWN PA 18940-9425

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BRISTOL MYERS SQUIBB CORP ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
10 / 20 / 2010

Transaction ID: SA11.13944443

Amount of Each Receipt this Period
80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 25330.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 767 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. JANE GELDERMANN

Mailing Address 2500 INDIGO LN UNIT 222

City State Zip Code
GLENVIEW IL 60026-8302

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 367.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955602

Amount of Each Receipt this Period
80.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN GEMMER

Mailing Address 13719 N 560 E

City State Zip Code
SYRACUSE IN 46567-7203

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 5 / 2 0 1 0

Transaction ID: SA11.13968871

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GORDON F. GENET

Mailing Address 5614 15TH AVE APT 4E

City State Zip Code
BROOKLYN NY 11219-4725

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED COMPUTER PROGRAMMER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 590.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13942313

Amount of Each Receipt this Period
95.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **275.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 768 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. VINCENT GENOVESE

Mailing Address 400 BURKLEY DRIVE

City State Zip Code
GREENVILLE KY 42345-2106

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MUHLENBERY COMMUNITY HOSPITAL ORTHOPEDIC SURGEON

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13957994

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. YOLANDA Y. GENTRY

Mailing Address 416 SOUTH MASSACHUSETTS STREET

City State Zip Code
WINFIELD KS 67156

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
STUDENT STUDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 7 / 2 0 1 0

Transaction ID: SA11.13969877

Amount of Each Receipt this Period
160.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DELBERT GEORGE

Mailing Address 13104 COLE LN

City State Zip Code
LEXINGTON MO 64067-8156

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 551.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943651

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **710.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 769 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DELBERT GEORGE	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 13104 COLE LN	Transaction ID: SA11.13956656
	City State Zip Code LEXINGTON MO 64067-8156	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 551.00	

B.	Full Name (Last, First, Middle Initial) MR. LLOYD F. GEORGE	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 46 HAMILTON LN	Transaction ID: SA11.13928987
	City State Zip Code PLAINSBORO NJ 08536-1126	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

C.	Full Name (Last, First, Middle Initial) MR. RON GERANOE	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 1151 ROXBORO COVE NE	Transaction ID: SA11.13931339
	City State Zip Code ATLANTA GA 30324-2909	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional)	▶	275.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 770 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ERIC GERBER
Mailing Address 7951 ANGLETON CT
City LORTON State VA Zip Code 22079-1012
FEC ID number of contributing federal political committee. **C**
Name of Employer IMPRESSIONS MARKETING SURVEYS Occupation CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 960.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13937383
Amount of Each Receipt this Period 320.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ERIC GERBER
Mailing Address 7951 ANGLETON CT
City LORTON State VA Zip Code 22079-1012
FEC ID number of contributing federal political committee. **C**
Name of Employer IMPRESSIONS MARKETING SURVEYS Occupation CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 960.00
Date of Receipt 10 / 21 / 2010
Transaction ID: SA11.13945701
Amount of Each Receipt this Period 320.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. THOMAS GERBIG
Mailing Address 1208 11TH AVE NE
City FARIBAULT State MN Zip Code 55021-3906
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 10 / 29 / 2010
Transaction ID: SA11.13959112
Amount of Each Receipt this Period 100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 740.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 771 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. MARY E. GERGESHA

Mailing Address 23785 N SHORE DR

City State Zip Code
EDWARDSBURG MI 49112-9524

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt M M / D D / Y Y Y Y
10 / 21 / 2010

Transaction ID: SA11.13945944

Amount of Each Receipt this Period 100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RADM. H. E. GERHARD, JR.

Mailing Address 124 PONY DR

City State Zip Code
FREEDOM PA 15042-2828

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt M M / D D / Y Y Y Y
10 / 21 / 2010

Transaction ID: SA11.13946356

Amount of Each Receipt this Period 50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MARK GERHART

Mailing Address 177 JOAN DR.

City State Zip Code
COLLEGEVILLE PA 19426-1959

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
SOCIAL SECURITY ADMINISTRATION TECHNICAL EXPERT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt M M / D D / Y Y Y Y
10 / 14 / 2010

Transaction ID: SA11.13930416

Amount of Each Receipt this Period 100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 250.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 772 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MARK GERHART	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 177 JOAN DR.	Transaction ID: SA11.13945929
	City State Zip Code COLLEGEVILLE PA 19426-1959	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SOCIAL SECURITY ADMINISTRATION	Occupation TECHNICAL EXPERT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

B.	Full Name (Last, First, Middle Initial) MS. LAURA M. GESICKI-WOOD	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 6498 CORY PL	Transaction ID: SA11.13941009
	City State Zip Code SPRINGFIELD VA 22150-1056	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

C.	Full Name (Last, First, Middle Initial) MR. LAWRENCE W. GESS	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 5300 STARRY CT	Transaction ID: SA11.13956209
	City State Zip Code FORT WORTH TX 76123-1956	Amount of Each Receipt this Period 101.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer MARY SULLINGS, MD	Occupation PHYSICIAN ASSISTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

SUBTOTAL of Receipts This Page (optional)	451.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 773 / 3187
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT W. GESSLER

Mailing Address 4902 CRANBERRY RD

City HARSHAW State WI Zip Code 54529-9724

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 405.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13950217
 Amount of Each Receipt this Period: 10.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT W. GESSLER

Mailing Address 4902 CRANBERRY RD

City HARSHAW State WI Zip Code 54529-9724

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 405.00

Date of Receipt: 11 / 02 / 2010
Transaction ID: SA11.13964918
 Amount of Each Receipt this Period: 20.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. MARK A. GIALLORENZI

Mailing Address 204 ABBEY DR

City SOUTH ABINGTON TOW State PA Zip Code 18411-8871

FEC ID number of contributing federal political committee. **C**

Name of Employer VALLEY ORAL & MISC FACIAL SURGERY Occupation ORAL SURGEON

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 14 / 2010
Transaction ID: SA11.13930022
 Amount of Each Receipt this Period: 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 280.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 774 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
PETER GIAMBASTIANI

Mailing Address 600 NEW HAMPSHIRE AVE, NW

City State Zip Code
WASHINGTON DC 20037-2403

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BLANK ROME GOVERNMENT REL- GOVERNMENT AFFAIRS
ATIONS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 420.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959391

Amount of Each Receipt this Period
42.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MARIO GIANNASI

Mailing Address 220 LAUREL ST. APT. 2

City State Zip Code
WAUKEE IA 50263-8526

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950534

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. EILEEN GIBBS

Mailing Address 8652 JOYZELLE AVE

City State Zip Code
GARDEN GROVE CA 92841-1549

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER INFORMATION REQUESTED PER BEST EFFORTS
BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 860.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945396

Amount of Each Receipt this Period
35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 127.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 775 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. HARRY M. GIBBS

Mailing Address 5695 BERWICK AVE NE

City State Zip Code
CANTON OH 44721-3712

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932932

Amount of Each Receipt this Period
26.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. HARRY M. GIBBS

Mailing Address 5695 BERWICK AVE NE

City State Zip Code
CANTON OH 44721-3712

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13971495

Amount of Each Receipt this Period
30.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. MICHAEL E. GIBBS

Mailing Address 325 W LYNWOOD AVE

City State Zip Code
SAN ANTONIO TX 78212-2215

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED
Occupation CATTLE RANCHER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953364

Amount of Each Receipt this Period
150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **206.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 776 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. STEPHANIE GIBREE	Date of Receipt MM / DD / YYYY 11 / 02 / 2010
	Mailing Address 190 CROSS ST	Transaction ID: SA11.13962682
	City State Zip Code BOYLSTON MA 01505-1009	Amount of Each Receipt this Period 110.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00	

B.	Full Name (Last, First, Middle Initial) MR. MARVIN A. GIBSON	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 5107 DAVENTRY PLACE	Transaction ID: SA11.13957081
	City State Zip Code MIDLAND TX 79705-2816	Amount of Each Receipt this Period 35.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 236.00	

C.	Full Name (Last, First, Middle Initial) MS. PEGGY M. GIDEON	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 4320 FOREST HILL DR UNIT 113	Transaction ID: SA11.13957015
	City State Zip Code FAIRFAX VA 22030-5767	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 590.00	

SUBTOTAL of Receipts This Page (optional)	▶	345.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 777 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DUANE GIER

Mailing Address **907 HILLSIDE TER.**

City **BRANDON** State **FL** Zip Code **33511-5531**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **245.00**

Date of Receipt **10 / 19 / 2010**

Transaction ID: SA11.13931792

Amount of Each Receipt this Period **20.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. EUGENE C. GIES

Mailing Address **8933 STARK RD**

City **ANNANDALE** State **VA** Zip Code **22003-3966**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **10 / 18 / 2010**

Transaction ID: SA11.13935511

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM H. GIESE

Mailing Address **P.O. BOX 581**

City **CLOVIS** State **NM** Zip Code **88102-0581**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **REAL ESTATE**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **10 / 28 / 2010**

Transaction ID: SA11.13960187

Amount of Each Receipt this Period **200.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) **320.00**

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 778 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
YALE GIESZL

Mailing Address 5 FLYING MANE ROAD

City State Zip Code
ROLLING HILLS CA 90274-5238

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13964564

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. CHERYL E. GIFFIN

Mailing Address 8 DODGE PL

City State Zip Code
GROSSE POINTE MI 48230-1939

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 375.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938584

Amount of Each Receipt this Period
175.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ALFRED G. GILBERT

Mailing Address 100 JOY LN

City State Zip Code
ROCHESTER NY 14617-1471

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951341

Amount of Each Receipt this Period
350.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **625.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 779 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
BILLIE R. GILBERT

Mailing Address 280 RIM ROCK RD

City State Zip Code
KERRVILLE TX 78028-7576

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931617

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
EDITH GILBERT

Mailing Address 4028 E MERCER WAY

City State Zip Code
MERCER ISLAND WA 98040-3822

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 251.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935679

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. MICHAEL D. GILBERT

Mailing Address 7752 GAMID DR

City State Zip Code
SPRINGFIELD VA 22153-2215

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED CFP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954855

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

275.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 780 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. MICHAEL D. GILBERT

Mailing Address 7752 GAMID DR

City State Zip Code
SPRINGFIELD VA 22153-2215

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED CFP

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 205.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954866

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. MICHAEL D. GILBERT

Mailing Address 7752 GAMID DR

City State Zip Code
SPRINGFIELD VA 22153-2215

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED CFP

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 205.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954867

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. TOM GILBERTSON

Mailing Address 500 COUNTY RD.

City State Zip Code
WATSON MN 56295-5000

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED FARMER

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 7 / 2 0 1 0

Transaction ID: SA11.13969036

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 781 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DAVID R. GILDEA
Mailing Address 435 HERMOSA WAY
City State Zip Code
MENLO PARK CA 94025-5823
FEC ID number of contributing federal political committee. **C**
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation OWNER
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 202.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13932743
Amount of Each Receipt this Period 101.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. FRANKLIN D. GILE
Mailing Address 7027 GASKIN PL
City State Zip Code
RIVERSIDE CA 92506-5615
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00
Date of Receipt 10 / 25 / 2010
Transaction ID: SA11.13951793
Amount of Each Receipt this Period 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CHRIS M. GILES
Mailing Address 724 PASCHAL DR.
City State Zip Code
LAFAYETTE CO 80026-1288
FEC ID number of contributing federal political committee. **C**
Name of Employer SEAGATE TECH Occupation ENGINEER
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00
Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13950328
Amount of Each Receipt this Period 75.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 276.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 782 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MR. CARLTON E. GILLAM</p> <p>Mailing Address 408 LEXBRIDGE LN</p> <p>City State Zip Code BALLWIN MO 63011-2438</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 205.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0</p> <p>Transaction ID: SA11.13955070</p> <p>Amount of Each Receipt this Period 105.00</p> <p>CONTRIBUTION</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) MRS. ELAINE TROUP GILLESPIE</p> <p>Mailing Address 4908 SARATOGA CIR SE</p> <p>City State Zip Code BROWNSBORO AL 35741-9323</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 215.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 1 0</p> <p>Transaction ID: SA11.13958834</p> <p>Amount of Each Receipt this Period 25.00</p> <p>CONTRIBUTION</p>
---	--

<p>C. Full Name (Last, First, Middle Initial) MR. LEROY GILLESPIE</p> <p>Mailing Address 410 SW CRESTVIEW STREET APARTMENT C4</p> <p>City State Zip Code PULLMAN WA 99163-2175</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer RETIRED Occupation RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 220.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 1 0</p> <p>Transaction ID: SA11.13947502</p> <p>Amount of Each Receipt this Period 50.00</p> <p>CONTRIBUTION</p>
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SUBTOTAL of Receipts This Page (optional)	180.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 783 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. M. GILLESPIE

Mailing Address 108 CARTER OAKS DR

City ANDERSON State SC Zip Code 29621-1903

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 517.00

Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13935779
Amount of Each Receipt this Period 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. M. GILLESPIE

Mailing Address 108 CARTER OAKS DR

City ANDERSON State SC Zip Code 29621-1903

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 517.00

Date of Receipt 11 / 18 / 2010
Transaction ID: SA11.13971357
Amount of Each Receipt this Period 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. VETA GILLENWATERS

Mailing Address P.O. BOX 8459

City SEMINOLE State FL Zip Code 33775-8459

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 631.00

Date of Receipt 11 / 08 / 2010
Transaction ID: SA11.13966871
Amount of Each Receipt this Period 100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 300.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 784 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. LUTHER R. GILLIAM

Mailing Address 36 FOXTAIL DR.

City	State	Zip Code
PORT DEPOSIT	MD	21904-2108

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 565.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935782

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. LUTHER R. GILLIAM

Mailing Address 36 FOXTAIL DR.

City	State	Zip Code
PORT DEPOSIT	MD	21904-2108

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 565.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946668

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. MARGARET BASS GILLIN

Mailing Address 77 OLD CHIMNEY RD

City	State	Zip Code
MOUNT KISCO	NY	10549-4046

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS
--	--

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13964433

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

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**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 785 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. OTIS GILLILAND

Mailing Address 3715 E. CLARK COURT

City State Zip Code
WICHITA KS 67218-4945

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 202.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934971

Amount of Each Receipt this Period

2.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. OTIS GILLILAND

Mailing Address 3715 E. CLARK COURT

City State Zip Code
WICHITA KS 67218-4945

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 202.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937232

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. OTIS GILLILAND

Mailing Address 3715 E. CLARK COURT

City State Zip Code
WICHITA KS 67218-4945

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 202.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958457

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

52.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 786 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. HAROLD GILMORE	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 3665 S COUNTY RD 300 E	Transaction ID: SA11.13933049
	City LIBERTY State IN Zip Code 47353-9332	Amount of Each Receipt this Period 51.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 528.00	

B.	Full Name (Last, First, Middle Initial) MS. SUSAN GILMORE	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 333 WALNUT PLAIN RD.	Transaction ID: SA11.13945996
	City ROCHESTER State MA Zip Code 02770-4029	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 270.00	

C.	Full Name (Last, First, Middle Initial) MR. ANTHONY A. GIOIA	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 7230 N 41ST ST	Transaction ID: SA11.13951941
	City AUGUSTA State MI Zip Code 49012-9662	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 400.00	

SUBTOTAL of Receipts This Page (optional)	301.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 787 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CHRIS GIROUARD

Mailing Address 1724 E 29TH ST.

City State Zip Code
TULSA OK 74114-5402

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WINEMAKER INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13951058

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
TED GITTENS

Mailing Address 1260 N JOHNSON ST

City State Zip Code
KAHOKA MO 63445-1100

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 242.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956982

Amount of Each Receipt this Period
51.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. D. WAYNE GITTINGER

Mailing Address 1420 5TH AVE. STE. 4100
SUITE 4100

City State Zip Code
SEATTLE WA 98101-2375

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LANE POWELL ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1001.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946818

Amount of Each Receipt this Period
101.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **652.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 788 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. REBECCA S. GLADE
 Mailing Address 2412 180TH TRL
 City State Zip Code
 GUTHRIE CENTER IA 50115-8523
 Date of Receipt
 M M / D D / Y Y Y Y
 1 1 / 0 4 / 2 0 1 0
Transaction ID: SA11.13965157
 Amount of Each Receipt this Period
 155.00
 CONTRIBUTION
 Name of Employer Occupation
 INFORMATION REQUESTED PER INFORMATION REQUESTED PER
 BEST EFFORTS BEST EFFORTS
 Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 265.00

B. Full Name (Last, First, Middle Initial)
MS. THERESA A. GLASCOCK
 Mailing Address 2152 1ST AVENUE SW
 City State Zip Code
 MINOT ND 58701-3429
 Date of Receipt
 M M / D D / Y Y Y Y
 1 1 / 1 6 / 2 0 1 0
Transaction ID: SA11.13969298
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION
 Name of Employer Occupation
 PLANET PIZZA KITCHEN MANAGER
 Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 670.00

C. Full Name (Last, First, Middle Initial)
MR. DELBERT E. GLASER
 Mailing Address 31997 SAND RIDGE RD.
 City State Zip Code
 LEBANON OR 97355-9232
 Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 1 9 / 2 0 1 0
Transaction ID: SA11.13941624
 Amount of Each Receipt this Period
 101.00
 CONTRIBUTION
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 201.00

SUBTOTAL of Receipts This Page (optional) ► 356.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 789 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. NICK GLEASON		Date of Receipt
	Mailing Address 1105 S COUNTRY CLUB RD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 19 / 2010
	City	State	Zip Code
	STILLWATER	OK	74074-1432
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13931789
Name of Employer OGNE		Occupation INSTRUMENT TECHNICIAN	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 260.00	<input type="text"/> 100.00
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) J L. GLEESON		Date of Receipt
	Mailing Address 2106 OLD BAINBRIDGE RD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 19 / 2010
	City	State	Zip Code
	TALLAHASSEE	FL	32303-3905
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13939332
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 350.00	<input type="text"/> 50.00
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) J L. GLEESON		Date of Receipt
	Mailing Address 2106 OLD BAINBRIDGE RD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 25 / 2010
	City	State	Zip Code
	TALLAHASSEE	FL	32303-3905
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13952181
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 350.00	<input type="text"/> 50.00
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 200.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 790 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. VICTOR B. GLENN

Mailing Address 5715 STONE DR

City State Zip Code
AMARILLO TX 79109-5739

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED CPA

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946150

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BRUCE V. GLIDDEN

Mailing Address 4132 161ST AVE SE

City State Zip Code
BELLEVUE WA 98006-1856

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938513

Amount of Each Receipt this Period
110.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES G. GLIMM

Mailing Address 120E 81ST ST APT 16E

City State Zip Code
NEW YORK NY 10028-1409

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SUNY AT STONY BROOK MATHEMATICS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 805.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959994

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 310.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 791 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL C. GLOVER

Mailing Address 2708 TIFFANY CT

City State Zip Code
NAPERVILLE IL 60565-3083

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 580.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955889

Amount of Each Receipt this Period
85.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. MARGARET E. GOATCER

Mailing Address 7107 S YALE AVE

City State Zip Code
TULSA OK 74136-6308

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928915

Amount of Each Receipt this Period
55.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CLAUDE S. GODFREY

Mailing Address 940 GLENBROOK DR NW

City State Zip Code
ATLANTA GA 30318-1624

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942616

Amount of Each Receipt this Period
150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **290.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 792 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. EDWARD L. GOEHRING

Mailing Address 5171 CENTENNIAL CREEK VW. NW

City State Zip Code
ACWORTH GA 30102-2175

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 271.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949551

Amount of Each Receipt this Period

10.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DANIEL GOELZER

Mailing Address 5941 SEARL TER.

City State Zip Code
BETHESDA MD 20816-2022

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PCAOB LAWYER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 540.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952684

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. KATHLEEN A. GOETSCH

Mailing Address 1513 AUGUSTA LN.

City State Zip Code
ATWATER CA 95301-4900

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
S.C.C.C.D. PROFESSOR

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 251.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953784

Amount of Each Receipt this Period

1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

261.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 793 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOHN GOFF

Mailing Address 202 ALPINE TRL

City State Zip Code
NEPTUNE CITY NJ 07753-4450

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TROPICONE OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1110.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942534

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MARJORIE L. GOFF

Mailing Address 9438 WATTS RD

City State Zip Code
BATON ROUGE LA 70811-2831

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 1 0

Transaction ID: SA11.13947662

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WILLIAM E. GOGGIN

Mailing Address 11311 WHISPER GLEN ST.

City State Zip Code
SAN ANTONIO TX 78230-3505

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937376

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 330.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 794 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
WILLIAM E. GOGGIN
Mailing Address 11311 WHISPER GLEN ST.
City SAN ANTONIO State TX Zip Code 78230-3505
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 280.00
Date of Receipt 10 / 28 / 2010
Transaction ID: SA11.13959686
Amount of Each Receipt this Period 40.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BRUCE JOHN GOHMANN
Mailing Address 702 200TH ST
City CLEARWATER State MN Zip Code 55320-1505
FEC ID number of contributing federal political committee. **C**
Name of Employer WEIDNER PLUMBING & HEATING Occupation MECHANICAL CONTRACTOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1481.00
Date of Receipt 10 / 26 / 2010
Transaction ID: SA11.13951551
Amount of Each Receipt this Period 110.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ASAF GOLA
Mailing Address 39 CARMINE ST APT 1B
City NEW YORK State NY Zip Code 10014-4495
FEC ID number of contributing federal political committee. **C**
Name of Employer ARGONAUT CAPITAL MANAGEME Occupation TRADER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.00
Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13932097
Amount of Each Receipt this Period 140.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 290.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 795 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
ASAF GOLA

Mailing Address **39 CARMINE ST
APT 1B**

City **NEW YORK** State **NY** Zip Code **10014-4495**

FEC ID number of contributing federal political committee. C

Name of Employer **ARGONAUT CAPITAL MANAGEME** Occupation **TRADER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt MM / DD / YYYY
11 / 11 / 2010

Transaction ID: SA11.13967692

Amount of Each Receipt this Period 50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. LEO GOLBA

Mailing Address **161 FRANKLIN AVENUE**

City **WEST ORANGE** State **NJ** Zip Code **07052-6045**

FEC ID number of contributing federal political committee. C

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 202.00

Date of Receipt MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13946825

Amount of Each Receipt this Period 51.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. MARIE GOLDBACH

Mailing Address **103 E 4TH ST**

City **MARATHON** State **WI** Zip Code **54448-9711**

FEC ID number of contributing federal political committee. C

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt MM / DD / YYYY
10 / 29 / 2010

Transaction ID: SA11.13959095

Amount of Each Receipt this Period 400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 501.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 796 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. SAMUEL GOLDBLATT

Mailing Address 401 9TH STREET N.W.
SUITE 900

City State Zip Code
WASHINGTON DC 20004-2145

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NIXON PEABODY ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
11 / 10 / 2010

Transaction ID: SA11.13968696

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. BRUCE LEONARD GOLDEN

Mailing Address 10375 ECLIPSE WAY

City State Zip Code
COLUMBIA MD 21044-4135

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UNIVERSITY OF MARYLAND PROFESSOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 262.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13937269

Amount of Each Receipt this Period
14.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL J. GOLDMAN

Mailing Address 401 9TH STREET, NW
SUITE 900

City State Zip Code
WASHINGTON DC 20004-2145

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NIXON & PEADBODY ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
11 / 22 / 2010

Transaction ID: SA11.13972719

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 514.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 797 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. GRAHAM GOLDSMITH	Date of Receipt MM / DD / YYYY 10 / 23 / 2010
	Mailing Address 2 VALLEY FORGE ROAD	Transaction ID: SA11.13947643
	City State Zip Code DARIEN CT 06820-2128	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation BANK OF AMERICA BANKING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

B.	Full Name (Last, First, Middle Initial) MR. EDWARD GOLIK	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 16322 BOSS GASTON RD	Transaction ID: SA11.13918421
	City State Zip Code RICHMOND TX 77498-8531	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation ROMTEX ENTERPRISES OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) MR. STEVEN GOMBOS	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 11350 RANDOM HILLS RD STE 400	Transaction ID: SA11.13965446
	City State Zip Code FAIRFAX VA 22030-7421	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	3300.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 798 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MR. JOHN K. GOMILLION</p> <p>Mailing Address 1054 CHATEAU DRIVE</p> <hr/> <p>City HELENA State AL Zip Code 35080-3556</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer BLUE CROSS/BLUE SHIELD AL Occupation SYSTEMS ANALYST</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 310.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>1</td><td>2</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Transaction ID: SA11.13968197</p> <p>Amount of Each Receipt this Period 110.00</p> <p>CONTRIBUTION</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	2	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	1	2	/	2	0	1	0												

<p>B. Full Name (Last, First, Middle Initial) MR. JOHN L. GOMPFF</p> <p>Mailing Address 7427 SOMERSET RD</p> <hr/> <p>City KNOXVILLE State TN Zip Code 37909-2356</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer RETIRED Occupation RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 320.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Transaction ID: SA11.13968922</p> <p>Amount of Each Receipt this Period 50.00</p> <p>CONTRIBUTION</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	5	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	1	5	/	2	0	1	0												

<p>C. Full Name (Last, First, Middle Initial) MR. XAVIER F. GONZALEZ</p> <p>Mailing Address 34 SHERWOOD FOREST DR</p> <hr/> <p>City ANDOVER State NJ Zip Code 07821-4029</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer RETIRED Occupation RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 240.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>2</td><td>5</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Transaction ID: SA11.13954031</p> <p>Amount of Each Receipt this Period 200.00</p> <p>CONTRIBUTION</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	5	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	2	5	/	2	0	1	0												

SUBTOTAL of Receipts This Page (optional)	360.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 799 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DALE D. GOOD

Mailing Address 812 SCHWANGER RD

City State Zip Code
ELIZABETHTOWN PA 17022-9642

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SEATON CORPORATION PRODUCTION WORKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945480

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. F. KEITH GOOD

Mailing Address 311 S MAIN ST

City State Zip Code
PERRYTON TX 79070-3147

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ATTORNEY AT LAW ATTORNEY

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13947133

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JOHN GOOD

Mailing Address 8 WEST ST

City State Zip Code
FAIRPORT NY 14450-2110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962616

Amount of Each Receipt this Period

60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

210.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 800 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ROGER H. GOODFELLOW

Mailing Address P.O. BOX 127

City State Zip Code
SCRANTON ND 58653-0127

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SCRANTON EQUITY GENERL MGR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13949609

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WESLEY M. GOODHART

Mailing Address 1859 SKYVIEW DRIVE

City State Zip Code
HEMET CA 92545-1637

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 910.00

Date of Receipt
MM / DD / YYYY
10 / 29 / 2010

Transaction ID: SA11.13961873

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CALVIN J. GOODMAN

Mailing Address 11901 W SUNSET BLVD
APT 102

City State Zip Code
LOS ANGELES CA 90049-4237

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2010

Transaction ID: SA11.13928071

Amount of Each Receipt this Period
80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 380.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 801 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
NANCY GOODRICH

Mailing Address 2600 BARRACKS ROAD - #C9

City CHARLOTTESVILLE State VA Zip Code 22901-2197

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13934170
 Amount of Each Receipt this Period: 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAVID F. GOODYEAR

Mailing Address 664 LINCOLN AVE

City BARBERTON State OH Zip Code 44203-2979

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 236.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13941702
 Amount of Each Receipt this Period: 76.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. JUNE GOODYKE

Mailing Address 25205 210TH STREET SW

City CROOKSTON State MN Zip Code 56716-9152

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 291.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13949353
 Amount of Each Receipt this Period: 30.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 156.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 802 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. JUNE GOODYKE

Mailing Address 25205 210TH STREET SW

City State Zip Code
CROOKSTON MN 56716-9152

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
291.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13953562

Amount of Each Receipt this Period
31.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. JUNE GOODYKE

Mailing Address 25205 210TH STREET SW

City State Zip Code
CROOKSTON MN 56716-9152

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
291.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	4	/	2	0	1	0

Transaction ID: SA11.13965710

Amount of Each Receipt this Period
30.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. PRISCILLA A. GOODYEAR

Mailing Address 10042 SIGNET CIR.

City State Zip Code
HUNTINGTN BCH CA 92646-6631

FEC ID number of contributing federal political committee. **C**

Name of Employer CENTURY 21 BERG REALTY Occupation REAL ESTATE SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	1	0

Transaction ID: SA11.13946859

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **561.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 803 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES P. GOOGE, JR.
Mailing Address 6541 ESPALIER CIR.
City MEMPHIS State TN Zip Code 38119-6648
FEC ID number of contributing federal political committee. **C**
Name of Employer FIRST HORIZON NATL. CORP. Occupation ATTORNEY
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 10 / 25 / 2010
Transaction ID: SA11.13954807
Amount of Each Receipt this Period 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. CHRISTINA C. GORDON
Mailing Address 61 FOSTER ST.
City CAMBRIDGE State MA Zip Code 02138-4750
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 266.00
Date of Receipt 11 / 08 / 2010
Transaction ID: SA11.13966762
Amount of Each Receipt this Period 25.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CLARENCE V. GORDON
Mailing Address 8329 S LANGLEY AVE
City CHICAGO State IL Zip Code 60619
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 451.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13933260
Amount of Each Receipt this Period 101.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 176.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 804 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JOHN GORDON

Mailing Address 1300 ARMY NAVY DR #704

City State Zip Code
ARLINGTON VA 22202-2050

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13961139

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILLIAM L. GORDON

Mailing Address 820 DOLORES DR

City State Zip Code
SANTA BARBARA CA 93109-1612

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13932747

Amount of Each Receipt this Period
101.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LYALL GORENSTEIN

Mailing Address 191 TWEED BLVD

City State Zip Code
NYACK NY 10960-4913

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED M.D.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
10 / 14 / 2010

Transaction ID: SA11.13918855

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **851.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 805 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM C. GORMAN

Mailing Address **2134 E LARKWOOD STREET**

City **WEST COVINA** State **CA** Zip Code **91791-2716**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **251.00**

Date of Receipt **11 / 03 / 2010**

Transaction ID: SA11.13965394

Amount of Each Receipt this Period **50.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. J. WARREN GORRELL, JR.

Mailing Address **8014 GREENWICH WOODS DRIVE**

City **MCLEAN** State **VA** Zip Code **22102-1332**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOGAN LOVELLS US LLP** Occupation **ATTORNEY**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **10000.00**

Date of Receipt **10 / 20 / 2010**

Transaction ID: SA11.13945237

Amount of Each Receipt this Period **10000.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MAJ. CHARLES S. GORTON

Mailing Address **604 CHARLOTTE COURT**

City **JACKSON** State **MO** Zip Code **63755-2517**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **MECHANICAL DESIGNER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt **10 / 26 / 2010**

Transaction ID: SA11.13956465

Amount of Each Receipt this Period **25.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **10075.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 806 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MAJ. CHARLES S. GORTON

Mailing Address 604 CHARLOTTE COURT

City State Zip Code
JACKSON MO 63755-2517

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED MECHANICAL DESIGNER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13964701

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. FRED U. GOSHE

Mailing Address 190 SAINT FRANCIS AVE APT 118

City State Zip Code
TIFFIN OH 44883-4010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 680.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933952

Amount of Each Receipt this Period

35.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. FRED U. GOSHE

Mailing Address 190 SAINT FRANCIS AVE APT 118

City State Zip Code
TIFFIN OH 44883-4010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 680.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949307

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 807 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. DONALD E. GOSS

Mailing Address 4807 JOHNSON AVE

City State Zip Code
WESTERN SPRGS IL 60558-1726

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 775.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935469

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
JANET E. GOSS

Mailing Address 1159 SYCAMORE LN

City State Zip Code
CLEARFIELD PA 16830-7156

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 215.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928342

Amount of Each Receipt this Period

20.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. TATE GOSS

Mailing Address 12449 E HARVARD DR.

City State Zip Code
AURORA CO 80014-1923

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13951080

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

370.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 808 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT GOTIE

Mailing Address 5352 PROSPECT TERRACE

City State Zip Code
TRUXTON NY 13158

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 267.00

Date of Receipt M M / D D / Y Y Y Y
10 / 19 / 2010

Transaction ID: SA11.13939713

Amount of Each Receipt this Period
26.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. SUZANNE GOTTLIEB

Mailing Address 617 N MAPLE DR.

City State Zip Code
BEVERLY HILLS CA 90210-3439

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
SELF-EMPLOYED REAL ESTATE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt M M / D D / Y Y Y Y
10 / 22 / 2010

Transaction ID: SA11.13948342

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DARWIN W. GOUGH

Mailing Address RR 2 BOX 145A

City State Zip Code
KEYSER WV 26726-9232

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
MINERAL COUNTY BOARD OF EDUCATION PUBLIC SCHOOL TEACHER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt M M / D D / Y Y Y Y
11 / 12 / 2010

Transaction ID: SA11.13968214

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 226.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 809 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. KINGDON GOULD, JR.
Mailing Address 1725 DESALES STREET NW
SUITE 900
City WASHINGTON State DC Zip Code 20036-4404
FEC ID number of contributing federal political committee. **C**
Name of Employer GOULD PROPERTY Occupation OWNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 11000.00
Date of Receipt 10 / 25 / 2010
Transaction ID: SA11.13955012
Amount of Each Receipt this Period 5000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. EWING B. GOURLEY
Mailing Address 1505 E TRAFFICWAY ST.
City SPRINGFIELD State MO Zip Code 65802-3174
FEC ID number of contributing federal political committee. **C**
Name of Employer HEALTH CARE AFFILIATES IN-C. Occupation OWNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13934713
Amount of Each Receipt this Period 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. EWING B. GOURLEY
Mailing Address 1505 E TRAFFICWAY ST.
City SPRINGFIELD State MO Zip Code 65802-3174
FEC ID number of contributing federal political committee. **C**
Name of Employer HEALTH CARE AFFILIATES IN-C. Occupation OWNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13935947
Amount of Each Receipt this Period 1.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 5101.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 810 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. COLIN M. GOVAN

Mailing Address 4106 CHIPPENDALE CT.

City State Zip Code
HAMPTON VA 23666-3602

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 470.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936804

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. BRUCE C. GRABER

Mailing Address 35 SOUTHGATE DR

City State Zip Code
ANNANDALE NJ 08801-3383

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 301.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963571

Amount of Each Receipt this Period

51.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. RANDALL GRABLE

Mailing Address 1965 E MOUNTAIN HOLLOW DR

City State Zip Code
PRESCOTT AZ 86301-5619

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 630.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957317

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

301.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 811 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MARIA GRABSKI

Mailing Address 23230 53RD AVE. SE

City BOTHELL State WA Zip Code 98021-8015

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13941682
Amount of Each Receipt this Period: 101.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WALTER C. GRAF

Mailing Address 35403 ANNS CHOICE WAY

City WARMINSTER State PA Zip Code 18974-3393

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt: 10 / 27 / 2010
Transaction ID: SA11.13958647
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES V. GRAFF

Mailing Address 14 CANTERBURY CT APT 15

City BLOOMINGTON State IL Zip Code 61701-3458

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 11 / 16 / 2010
Transaction ID: SA11.13969164
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 191.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 812 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES P. GRAHAM

Mailing Address 4905 RADBROOK PLACE

City State Zip Code
DALLAS TX 75220-3942

FEC ID number of contributing federal political committee. **C**

Name of Employer PALO INC Occupation EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945610

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN C. GRAHAM

Mailing Address 20001 BIG PINES HWY

City State Zip Code
VALYERMO CA 93563-1002

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Transaction ID: SA11.13968175

Amount of Each Receipt this Period
85.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT K. GRAHAM

Mailing Address 1740 DREXEL LAKE DR

City State Zip Code
COLUMBIA SC 29223-3918

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939571

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 210.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 813 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT K. GRAHAM

Mailing Address 1740 DREXEL LAKE DR

City State Zip Code
COLUMBIA SC 29223-3918

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt: 11 / 22 / 2010
Transaction ID: SA11.13972754
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. STAN R. GRAHAM

Mailing Address 40586 VIA ESTRADA

City State Zip Code
MURRIETA CA 92562-3502

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13940685
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. STANLEY S. GRAHAM

Mailing Address 5200 N CAMINO SUMO

City State Zip Code
TUCSON AZ 85718-6046

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA11.13931393
Amount of Each Receipt this Period: 200.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 275.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 814 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM M. GRAHAM

Mailing Address 2719 CRENSHAW CT.

City State Zip Code
SALISBURY NC 28144-8412

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WALLACE & GRAHAM LAWYER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
11 / 03 / 2010

Transaction ID: SA11.13966022

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. RAZVAN N. GRAMATOVICI

Mailing Address 245 EVERGREEN DRIVE

City State Zip Code
FRANKLIN PA 16323-1811

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WARREN GENERAL HOSPITAL PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
10 / 24 / 2010

Transaction ID: SA11.13947731

Amount of Each Receipt this Period
110.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CHARLES ALLEN GRAMMER

Mailing Address 807 E 3RD ST

City State Zip Code
LELAND MS 38756-2905

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 291.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13933077

Amount of Each Receipt this Period
26.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **5136.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 815 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CHARLES ALLEN GRAMMER
Mailing Address 807 E 3RD ST

City LELAND State MS Zip Code 38756-2905

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 291.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13955246
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CHARLES ALLEN GRAMMER
Mailing Address 807 E 3RD ST

City LELAND State MS Zip Code 38756-2905

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 291.00

Date of Receipt: 11 / 01 / 2010
Transaction ID: SA11.13963968
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
S GRANATH
Mailing Address 2009 PRICE ST.

City HENDERSON State TX Zip Code 75654-2523

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13944866
Amount of Each Receipt this Period: 65.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 145.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 816 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. BERTIL GRANBORG

Mailing Address P.O. BOX 6695

City State Zip Code
INCLINE VLG NV 89450-6695

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1131.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956091

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. FRANK F. GRANDONE

Mailing Address 43 CARRIAGE DRIVE

City State Zip Code
TOLLAND CT 06084-2908

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13969290

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DOUG GRANE

Mailing Address 1005 WOBURN COURT

City State Zip Code
WEST MCLEAN VA 22102-2133

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RAPTOR STRATEGIES LLC SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1881.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959390

Amount of Each Receipt this Period
209.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 284.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 817 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ABIGAIL GRANT

Mailing Address 9230 WISTER DR

City LA MESA State CA Zip Code 91941-4138

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 09 / 2010

Transaction ID: SA11.13967451

Amount of Each Receipt this Period 100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CHARLOTTE M. GRANT

Mailing Address 6404 21ST. AVE W APT. M310

City BRADENTON State FL Zip Code 34209-7870

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 02 / 2010

Transaction ID: SA11.13964651

Amount of Each Receipt this Period 120.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CHARLOTTE M. GRANT

Mailing Address 6404 21ST. AVE W APT. M310

City BRADENTON State FL Zip Code 34209-7870

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 08 / 2010

Transaction ID: SA11.13967125

Amount of Each Receipt this Period 25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 245.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 818 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
WILLIAM GRAVALEC

Mailing Address 1131 BENTLEY DR.

City State Zip Code
NAPLES FL 34110-8644

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2010

Transaction ID: SA11.13956673

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
E. ANN GRAVES

Mailing Address 2219 EAST 45TH PLACE

City State Zip Code
TULSA OK 74105-4250

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
10 / 20 / 2010

Transaction ID: SA11.13945248

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ANTHONY GRAY

Mailing Address 3065 SW MONTEBELLO PL

City State Zip Code
PALM CITY FL 34990-2635

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13948801

Amount of Each Receipt this Period
150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 819 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CHESTER L. GRAY

Mailing Address **105 FOWLER ROAD**

City **GRAFTON** State **NH** Zip Code **03240-3629**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **10 / 18 / 2010**

Transaction ID: SA11.13929046

Amount of Each Receipt this Period **80.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
HORACE A. GRAY, III

Mailing Address **5004 MONUMENT AVENUE SUITE 200
GRAYCO INC**

City **RICHMOND** State **VA** Zip Code **23230-3629**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **11 / 17 / 2010**

Transaction ID: SA11.13969925

Amount of Each Receipt this Period **300.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN D. GRAY

Mailing Address **3820 BEECH ST**

City **CINCINNATI** State **OH** Zip Code **45227-3602**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1300.00**

Date of Receipt **10 / 19 / 2010**

Transaction ID: SA11.13941771

Amount of Each Receipt this Period **300.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **680.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 820 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOHN D. GRAY

Mailing Address 3820 BEECH ST

City State Zip Code
CINCINNATI OH 45227-3602

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956730

Amount of Each Receipt this Period
300.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MARIANNE E. GRAY

Mailing Address 11479 DONA EVITA DR.

City State Zip Code
STUDIO CITY CA 91604-4254

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954685

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. MARY LOU GRAY

Mailing Address 4507 CORAL BLVD

City State Zip Code
BRADENTON FL 34210-2102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 236.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952318

Amount of Each Receipt this Period
21.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **521.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 821 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. MARY LOU GRAY

Mailing Address 4507 CORAL BLVD

City State Zip Code
BRADENTON FL 34210-2102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 236.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956610

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. STEPHANIE E. GRAY

Mailing Address P.O. BOX 606

City State Zip Code
SOUTH ORLEANS MA 02662-0606

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929320

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. STEPHANIE E. GRAY

Mailing Address P.O. BOX 606

City State Zip Code
SOUTH ORLEANS MA 02662-0606

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950886

Amount of Each Receipt this Period
30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 120.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 822 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. SIDNEY R. GRAYBILL

Mailing Address 5940 LEEBEL RD

City EAST PETERSBURG State PA Zip Code 17520-1512

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13950047
 Amount of Each Receipt this Period: 30.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. SHARLOT A. GRAYSON

Mailing Address 12751 KIAWAH DR

City CARMEL State IN Zip Code 46033-8375

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13935611
 Amount of Each Receipt this Period: 50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. GERTRUDE F. GRDEN

Mailing Address 240 S WASHINGTON ST.

City BALTIMORE State MD Zip Code 21231-2619

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13946848
 Amount of Each Receipt this Period: 5.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 85.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 823 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. GERTRUDE F. GRDEN

Mailing Address 240 S WASHINGTON ST.

City State Zip Code
BALTIMORE MD 21231-2619

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 7 / 2 0 1 0

Transaction ID: SA11.13969842

Amount of Each Receipt this Period
5.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MARION J. GRDEN

Mailing Address 240 S WASHINGTON ST

City State Zip Code
BALTIMORE MD 21231-2619

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946849

Amount of Each Receipt this Period
5.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MARION J. GRDEN

Mailing Address 240 S WASHINGTON ST

City State Zip Code
BALTIMORE MD 21231-2619

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 7 / 2 0 1 0

Transaction ID: SA11.13969843

Amount of Each Receipt this Period
5.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 15.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 824 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DR. WILLIAM W. GREAVES

Mailing Address 8851 N BAYSIDE DR

City State Zip Code
BAYSIDE WI 53217-1910

FEC ID number of contributing federal political committee. C

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 965.00

Date of Receipt M M / D D / Y Y Y Y
10 / 20 / 2010

Transaction ID: SA11.13944585

Amount of Each Receipt this Period 500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DR. WILLIAM W. GREAVES

Mailing Address 8851 N BAYSIDE DR

City State Zip Code
BAYSIDE WI 53217-1910

FEC ID number of contributing federal political committee. C

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 965.00

Date of Receipt M M / D D / Y Y Y Y
10 / 25 / 2010

Transaction ID: SA11.13954992

Amount of Each Receipt this Period 50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. MILDRED GREBING

Mailing Address 398 PCR 428

City State Zip Code
FROHNA MO 63748-8113

FEC ID number of contributing federal political committee. C

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt M M / D D / Y Y Y Y
11 / 03 / 2010

Transaction ID: SA11.13965292

Amount of Each Receipt this Period 60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 610.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 825 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. CONNIE B. GRECO

Mailing Address 4541 WHITE CEDAR LN

City State Zip Code
DELRAY BEACH FL 33445-7036

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
241.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	2	/	2	0	1	0

Transaction ID: SA11.13971604

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MICHAEL D. GRECZEK

Mailing Address 32711 WALTHAM XING

City State Zip Code
FULSHEAR TX 77441-4203

FEC ID number of contributing federal political committee. **C**

Name of Employer BASF
Occupation CHEMICAL ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	1	0

Transaction ID: SA11.13940741

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DALE GREENE

Mailing Address 114 ABBEY LN

City State Zip Code
TELFORD PA 18969-2168

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13954946

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **175.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 826 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DR. DONALD GREEN

Mailing Address 220 HARDENBURGH AVENUE

City State Zip Code
DEMAREST NJ 07627-1726

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953128

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. DORIS M. GREENDYKE

Mailing Address 17907 PETERSON ROAD

City State Zip Code
PLATTSMOUTH NE 68048-7319

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 301.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939722

Amount of Each Receipt this Period

101.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. GEOFFREY GREENER

Mailing Address ONE BRYANT PARK

City State Zip Code
NEW YORK NY 10036-6728

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BANK OF AMERICA MERRILL LYNCH HEAD OF GLOBAL MARKETS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 1 0

Transaction ID: SA11.13966557

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2301.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 827 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GEORGE M. GREENE

Mailing Address 806 SW 601ST. RD.

City State Zip Code
CHILHOWEE MO 64733-9235

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	6	/	2	0	1	0

Transaction ID: SA11.13956632

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
HOWARD GREENHALGH

Mailing Address 700 SMITH ST APT 246

City State Zip Code
PROVIDENCE RI 02908-3552

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
271.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	9	/	2	0	1	0

Transaction ID: SA11.13967447

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES C. GREEN

Mailing Address 190 S LA SALLE ST
STE 3000

City State Zip Code
CHICAGO IL 60603-3446

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13955011

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **400.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 828 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JAMES L. GREENWAY

Mailing Address 108 GREENWAY DR

City State Zip Code
ANDERSON SC 29625-5725

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 19 / 2010

Transaction ID: SA11.13970066

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MARGARET GREEN

Mailing Address 1712 EAGLE NEST WAY

City State Zip Code
LOUISVILLE KY 40222-3995

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 01 / 2010

Transaction ID: SA11.13963669

Amount of Each Receipt this Period

40.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. MIRIAM L. GREEN

Mailing Address 7 FREEDOM CT.

City State Zip Code
MONTVILLE NJ 07045-9156

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
559.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 25 / 2010

Transaction ID: SA11.13954465

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

115.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 829 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. MIRIAM L. GREEN

Mailing Address 7 FREEDOM CT.

City State Zip Code
MONTVILLE NJ 07045-9156

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 559.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 4 / 2 0 1 0

Transaction ID: SA11.13965757

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. MIRIAM L. GREEN

Mailing Address 7 FREEDOM CT.

City State Zip Code
MONTVILLE NJ 07045-9156

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 559.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13972958

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. NANCY P. GREENFIELD

Mailing Address P.O. BOX 13359

City State Zip Code
FORT PIERCE FL 34979-3359

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961386

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

250.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 830 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. PATRICK J. GREENE

Mailing Address 2817 LENOX ST.

City State Zip Code
TOMS RIVER NJ 08755-2550

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13931400

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. PATRICK J. GREENE

Mailing Address 2817 LENOX ST.

City State Zip Code
TOMS RIVER NJ 08755-2550

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953240

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ROBERT EARL GREEN

Mailing Address 205 LANDFALL ROAD NW

City State Zip Code
ATLANTA GA 30328-1825

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948594

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 831 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. RUTH S. GREEN

Mailing Address 2822 SW 5TH ST.

City State Zip Code
BOYNTON BEACH FL 33435-7905

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13951911

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. VERA L. GREEN

Mailing Address P.O. BOX 70

City State Zip Code
SAN JUAN CAPISTRAN CA 92693-0070

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13947455

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. VERA L. GREEN

Mailing Address P.O. BOX 70

City State Zip Code
SAN JUAN CAPISTRAN CA 92693-0070

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 1 0

Transaction ID: SA11.13967164

Amount of Each Receipt this Period

10.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 832 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM M. GREEN

Mailing Address 704 W. LOWELL AVENUE

City State Zip Code
HAVERHILL MA 01832-3426

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 476.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13934622
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM M. GREEN

Mailing Address 704 W. LOWELL AVENUE

City State Zip Code
HAVERHILL MA 01832-3426

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 476.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13935962
Amount of Each Receipt this Period: 1.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID GREESON

Mailing Address 600 COUNTRY CLUB DRIVE

City State Zip Code
RICHMOND TX 77469-5004

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13957926
Amount of Each Receipt this Period: 250.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 301.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 833 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CLAUDE G. GREGORY

Mailing Address 11382 WYNDHAM CIRCLE

City State Zip Code
PICKERINGTON OH 43147-9017

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13938390

Amount of Each Receipt this Period
CONTRIBUTION 20.00

B. Full Name (Last, First, Middle Initial)
MR. CLAUDE G. GREGORY

Mailing Address 11382 WYNDHAM CIRCLE

City State Zip Code
PICKERINGTON OH 43147-9017

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13964886

Amount of Each Receipt this Period
CONTRIBUTION 40.00

C. Full Name (Last, First, Middle Initial)
DONNA J. GREGORY

Mailing Address 1852 WARREN RD.

City State Zip Code
LORENA TX 76655-3227

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 286.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948487

Amount of Each Receipt this Period
CONTRIBUTION 51.00

SUBTOTAL of Receipts This Page (optional) ► 111.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 834 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DONNA J. GREGORY

Mailing Address 1852 WARREN RD.

City LORENA State TX Zip Code 76655-3227

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 286.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13956672
 Amount of Each Receipt this Period: 75.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. KEITH GREGORY

Mailing Address P.O. BOX 1053

City SOLANA BEACH State CA Zip Code 92075-1053

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED
Occupation REAL ESTATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13945872
 Amount of Each Receipt this Period: 100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. NINA J. GREGORY

Mailing Address 14615 NATALIE DR

City WHITTIER State CA Zip Code 90604-2802

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13928886
 Amount of Each Receipt this Period: 200.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **375.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 835 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. NINA J. GREGORY

Mailing Address 14615 NATALIE DR

City State Zip Code
WHITTIER CA 90604-2802

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941122

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. NINA J. GREGORY

Mailing Address 14615 NATALIE DR

City State Zip Code
WHITTIER CA 90604-2802

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956847

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. NINA J. GREGORY

Mailing Address 14615 NATALIE DR

City State Zip Code
WHITTIER CA 90604-2802

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13971317

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 250.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 836 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. AUGUST GREIDANUS		Date of Receipt MM / DD / YYYY 10 / 22 / 2010		
	Mailing Address 501 CUTTERS MILL LN		Transaction ID: SA11.13949614		
	City SCHAUMBURG	State IL	Zip Code 60194-4534	Amount of Each Receipt this Period 450.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
	Name of Employer RETIRED	Occupation RETIRED	Aggregate Year-to-Date 1350.00		

B.	Full Name (Last, First, Middle Initial) MR. AUGUST GREIDANUS		Date of Receipt MM / DD / YYYY 10 / 26 / 2010		
	Mailing Address 501 CUTTERS MILL LN		Transaction ID: SA11.13957329		
	City SCHAUMBURG	State IL	Zip Code 60194-4534	Amount of Each Receipt this Period 400.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
	Name of Employer RETIRED	Occupation RETIRED	Aggregate Year-to-Date 1350.00		

C.	Full Name (Last, First, Middle Initial) MR. PHILIP R. GREIPP		Date of Receipt MM / DD / YYYY 10 / 29 / 2010		
	Mailing Address 424 10TH AVE SW		Transaction ID: SA11.13959359		
	City ROCHESTER	State MN	Zip Code 55902-2911	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
	Name of Employer MAYO CLINIC	Occupation PHYSICIAN	Aggregate Year-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional)

950.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 837 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MS. JANE T. GREYER</p> <p>Mailing Address 4830 KENNETT PIKE APT. 4205</p> <p>City WILMINGTON State DE Zip Code 19807-1858</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer RETIRED Occupation RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1160.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 1 0</p> <p>Transaction ID: SA11.13957972</p> <p>Amount of Each Receipt this Period -50.00</p> <p>CONTRIBUTION</p> <p>CHARGED BACK</p>
--	--

<p>B. Full Name (Last, First, Middle Initial) MS. BERTHA V. GREULICH</p> <p>Mailing Address 79 WATERTOWN ROAD</p> <p>City BERLIN State MD Zip Code 21811-1716</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer RETIRED Occupation RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 310.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 1 0</p> <p>Transaction ID: SA11.13959465</p> <p>Amount of Each Receipt this Period 50.00</p> <p>CONTRIBUTION</p>
---	---

<p>C. Full Name (Last, First, Middle Initial) RANDY H. GRIDER</p> <p>Mailing Address 91 BUTLER DR.</p> <p>City RUSSELL SPGS State KY Zip Code 42642-4255</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer STEPHENS PIPE AND STEEL LLC Occupation TRUCK DRIVER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 400.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 1 0</p> <p>Transaction ID: SA11.13946037</p> <p>Amount of Each Receipt this Period 40.00</p> <p>CONTRIBUTION</p>
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SUBTOTAL of Receipts This Page (optional)	40.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 838 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. JOANN M. GRIER

Mailing Address 415 ROLLING RD

City State Zip Code
SALISBURY MD 21801-7115

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954061

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. JOANN M. GRIER

Mailing Address 415 ROLLING RD

City State Zip Code
SALISBURY MD 21801-7115

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959286

Amount of Each Receipt this Period

75.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JAMES B. GRIFFITTS

Mailing Address 62 TIMBER OAKS DR

City State Zip Code
MARSHFIELD MO 65706-8229

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13965309

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

225.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 839 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. R. BAXTER GRIFFITH, JR.
Mailing Address 7421 TOMCRIS COURT

City State Zip Code
SPRINGFIELD VA 22153-1355

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
SELF-EMPLOYED SALES

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 22 / 2010

Transaction ID: SA11.13950450
Amount of Each Receipt this Period
300.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RICHARD S. GRIFFITH
Mailing Address 3417 MILAM ST

City State Zip Code
HOUSTON TX 77002-9531

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
SELF-EMPLOYED INVESTOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
10860.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 07 / 2010

Transaction ID: SA11.13966016
Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
THOMAS H. GRIFFITH, M.D.
Mailing Address 104 SCENIC DR. SE

City State Zip Code
HUNTSVILLE AL 35801-2819

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
4600.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 29 / 2010

Transaction ID: SA11.13961812
Amount of Each Receipt this Period
2300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 2850.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 840 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. BILLY W. GRIGGS

Mailing Address 1932 N CALHOUN AVE

City LIBERAL State KS Zip Code 67901-2121

FEC ID number of contributing federal political committee. **C**

Name of Employer LIBERAL GASKET MFG W IVA Occupation SELF-EMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 660.00

Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13932133
Amount of Each Receipt this Period 40.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOE GRILLS

Mailing Address P.O. BOX 98

City RAPIDAN State VA Zip Code 22733-0098

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation INVESTMENT MANAGMENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2010
Transaction ID: SA11.13952683
Amount of Each Receipt this Period 200.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CDR PAT GRILLO, USN

Mailing Address 1330 VICTORIAN CRES

City VIRGINIA BEACH State VA Zip Code 23454-2249

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13936147
Amount of Each Receipt this Period 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 290.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 841 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DEBBIE GRIMES

Mailing Address 42876 N BERRONG CT.

City State Zip Code
WINTHROP HBR IL 60096-1017

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	6	/	2	0	1	0

Transaction ID: SA11.13956525

Amount of Each Receipt this Period
75.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. GEORGENE F. GRIMM

Mailing Address 891 BURGUNDY LN.

City State Zip Code
MANCHESTER MO 63011-3588

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
287.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13933083

Amount of Each Receipt this Period
51.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. IOSIF GRINZAYD

Mailing Address 435 NEPTUNE AVE., APT. 17H

City State Zip Code
BROOKLYN NY 11224-5803

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	1	0

Transaction ID: SA11.13949247

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **151.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 842 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. IOSIF GRINZAYD

Mailing Address 435 NEPTUNE AVE., APT. 17H

City State Zip Code
BROOKLYN NY 11224-5803

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952547

Amount of Each Receipt this Period
16.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ALAN N. GRISEMER

Mailing Address 38 MADISON DR

City State Zip Code
CARSON CITY NV 89706-0332

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13951698

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. DENNIS GRIZZLE

Mailing Address 109 WILSHIRE DR

City State Zip Code
VICTORIA TX 77904-1853

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
441.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946305

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **216.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 843 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. JEANNE M. GROGAN

Mailing Address 12 FOSSIL HILL RD

City State Zip Code
WEATHERFORD TX 76087-8626

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 251.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948397

Amount of Each Receipt this Period

1.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ROY J. GROGAN

Mailing Address 12 FOSSIL HILL ROAD

City State Zip Code
WEATHERFORD TX 76087-8626

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 461.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948398

Amount of Each Receipt this Period

1.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
EDWARD S. GROMAN

Mailing Address 7280 SW LAKESIDE LOOP

City State Zip Code
WILSONVILLE OR 97070-6454

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 211.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941016

Amount of Each Receipt this Period

26.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

28.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 844 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) GARY GROSNER	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 5486 VIA MARINA	Transaction ID: SA11.13956644
	City State Zip Code BUFFALO NY 14221-2839	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) MR. DAVID H. GROSSMAN	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 20570 WEST 8 MILE ROAD	Transaction ID: SA11.13966031
	City State Zip Code SOUTHFIELD MI 48075-5640	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer POLITICAL PRODUCTIONS	Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) MR. HARRY GROSSMAN	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 1030 WINTERGREEN TERRACE	Transaction ID: SA11.13928550
	City State Zip Code ROCKVILLE MD 20850-1005	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional)	▶	1400.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 845 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOSEPH A. GROSS

Mailing Address P.O. BOX 175

City State Zip Code
BARRYVILLE NY 12719-0175

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 206.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928304

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NORENE GROSSMAN

Mailing Address 1337 KROEGER DR.

City State Zip Code
SAINT LOUIS MO 63135-2233

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954332

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DENNIS GROTH

Mailing Address P.O. BOX 405

City State Zip Code
OAKVILLE CA 94562-0405

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GROTH VINEYARDS & WINERY WINEGROWER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13932396

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **390.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 846 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DR. M. GROTHAUS

Mailing Address 442 W HIGH ST # 3

City State Zip Code
BRYAN OH 43506-1681

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MID WEST COMMUNITY HEALTH ASSOCIATES PHYSICIAN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13957657

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JOHN E. GRUENEMEIER

Mailing Address 29 AVENIDA DE LAS NACIONES

City State Zip Code
RIO RICO AZ 85648-7325

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
VALVATION RESERVE CORP. APPRAISER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 310.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955049

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. DONALD G. GRUETT

Mailing Address 3612 SHEPHERD LN

City State Zip Code
MANITOWOC WI 54220-3031

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 251.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13960052

Amount of Each Receipt this Period
1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **526.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 847 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAY R. GRUMME

Mailing Address 12577 ROYCE COURT

City State Zip Code
CARMEL IN 46033-2478

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ABOVE ALL PHOTOGRAPHY, LTD BUSINESS OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2010

Transaction ID: SA11.13965640

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. CAROL A. GUEDEZ

Mailing Address 121 FAIRMOUNT RD E

City State Zip Code
CALIFON NJ 07830-3113

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ORANGE BUSINESS SERVICES MANAGEMENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2010

Transaction ID: SA11.13951628

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CHARLES DAVID GUENTHER

Mailing Address 1622 ADDINGTON DR

City State Zip Code
PRESCOTT AZ 86301-4458

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13935193

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 165.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 848 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. PATRICIA A. GUENTHER

Mailing Address 7920 OAK LEAF CIR

City State Zip Code
CINCINNATI OH 45241-1309

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GE MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928052

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CHARLES S. GUENZER

Mailing Address 3852 GROVE AVENUE

City State Zip Code
PALO ALTO CA 94303-4538

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935794

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN J.G. GUERIN

Mailing Address P.O. BOX 1610

City State Zip Code
REDLANDS CA 92373-0481

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
COUNTY OF RIVERSIDE PRINCIPAL PLANNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944386

Amount of Each Receipt this Period
180.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 305.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 849 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. DOLORES F. GUESS

Mailing Address 3950 BYRONELL DR N

City State Zip Code
MOBILE AL 36693-5503

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 1 0

Transaction ID: SA11.13971105

Amount of Each Receipt this Period

80.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. FANNALOU GUGGISBERG

Mailing Address 21017 N 125TH AVE

City State Zip Code
SUN CITY WEST AZ 85375-1922

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937247

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
CLARK L. GUGLER

Mailing Address 1409 FOX RIVER PKWY.

City State Zip Code
WAUKESHA WI 53189-7124

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943278

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

280.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 850 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. MARY J. GULINO

Mailing Address 4200 OLD COLUMBIA PIKE

City State Zip Code
ANNANDALE VA 22003-2122

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 639.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946667

Amount of Each Receipt this Period

75.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. MARY J. GULINO

Mailing Address 4200 OLD COLUMBIA PIKE

City State Zip Code
ANNANDALE VA 22003-2122

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 639.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953504

Amount of Each Receipt this Period

80.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. MARY J. GULINO

Mailing Address 4200 OLD COLUMBIA PIKE

City State Zip Code
ANNANDALE VA 22003-2122

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 639.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958541

Amount of Each Receipt this Period

76.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

231.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 851 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. DEAN GULIS

Mailing Address 1604 HEATHERWOOD DRIVE

City State Zip Code
TROY MI 48098-2687

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LOOMIS SAYLES & CO. VICE PRESIDENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935309

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. DEAN GULIS

Mailing Address 1604 HEATHERWOOD DRIVE

City State Zip Code
TROY MI 48098-2687

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LOOMIS SAYLES & CO. VICE PRESIDENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957187

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. CHARLES GULLING

Mailing Address 224 BROOKVIEW DR SW

City State Zip Code
CANTON OH 44709-4207

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939756

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 852 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. NAOEMI GULLICKSON

Mailing Address 30 W RALEIGH AVE.

City State Zip Code
STATEN ISLAND NY 10310-2745

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951402

Amount of Each Receipt this Period

210.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. KRISTEN GULLOTT

Mailing Address 2405 LESLIE AVENUE

City State Zip Code
ALEXANDRIA VA 22301-1112

FEC ID number of contributing federal political committee. **C**

Name of Employer
BROWN RUDNICK

Occupation
DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959398

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
LOWELL GUM

Mailing Address 775 SAWMILL RD.

City State Zip Code
ROCKY COMFORT MO 64861-7209

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954093

Amount of Each Receipt this Period

45.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

505.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 853 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. ERIKA GUMMEL		Date of Receipt
	Mailing Address 123 VALLEY VW.		<input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	POMPTON PLNS	NJ	07444-2164
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13946609
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="320.00"/>	<input type="text" value="30.00"/>
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) MRS. ERIKA GUMMEL		Date of Receipt
	Mailing Address 123 VALLEY VW.		<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	POMPTON PLNS	NJ	07444-2164
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13949951
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="320.00"/>	<input type="text" value="40.00"/>
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) MRS. LINDA GUNGOLL		Date of Receipt
	Mailing Address 1611 OOSAGE AVENUE		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	ENID	OK	73703-6905
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer SELF-EMPLOYED		Occupation OIL & GAS INVESTING	Transaction ID: SA11.13961330
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="225.00"/>	<input type="text" value="125.00"/>
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="195.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 854 / 3187
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. LINDA GUNGOLL

Mailing Address 1611 OOSAGE AVENUE

City State Zip Code
ENID OK 73703-6905

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation OIL & GAS INVESTING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961904

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. NANCY C. GUNN

Mailing Address 17030 CADBURY CIR. UNIT 116
UNIT 116

City State Zip Code
LEWES DE 19958-7052

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952327

Amount of Each Receipt this Period
101.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. KEITH R. GUNTER

Mailing Address 1308 KINGSBURY CT

City State Zip Code
POWDER SPRINGS GA 30127-6933

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928867

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **401.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 855 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ALBERT W. GUNTHER

Mailing Address 720 TETE LOURS DR

City State Zip Code
MANDEVILLE LA 70471-1766

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	1	0

Transaction ID: SA11.13972056

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CHARLES F. GUNTHER, JR.

Mailing Address P.O. BOX 521

City State Zip Code
CROTON FALLS NY 10519-0521

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	1	0

Transaction ID: SA11.13946883

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM K. GUPTILL

Mailing Address 2573 SAN ANDRES WAY

City State Zip Code
CLAREMONT CA 91711-1555

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED
Occupation BUSINESS CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
651.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	6	/	2	0	1	0

Transaction ID: SA11.13956574

Amount of Each Receipt this Period
300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **550.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 856 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM K. GUPTILL

Mailing Address 2573 SAN ANDRES WAY

City State Zip Code
CLAREMONT CA 91711-1555

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED BUSINESS CONSULTANT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 651.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	1	0

Transaction ID: SA11.13963593

Amount of Each Receipt this Period
201.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. STEPHEN E. GURNEY

Mailing Address 161 RED MAPLE WAY

City State Zip Code
NICEVILLE FL 32578-3746

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
M.T.S.I. ENGINEER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	1	0

Transaction ID: SA11.13961134

Amount of Each Receipt this Period
115.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ERIC P. GUSTAVSON

Mailing Address 3657 CROSS CREEK ROAD

City State Zip Code
MALIBU CA 90265-4929

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
THROUGHBRED HORSEBREEDER OWNER/MANAGER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	1	0

Transaction ID: SA11.13942512

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1316.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 857 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JAMES A. GUSTAFSON

Mailing Address 2578 OUTLOOK CV.

City State Zip Code
PORT HUENEME CA 93041-1566

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DUROM VDM COUNSELOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940964

Amount of Each Receipt this Period

35.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JAMES A. GUSTAFSON

Mailing Address 2578 OUTLOOK CV.

City State Zip Code
PORT HUENEME CA 93041-1566

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DUROM VDM COUNSELOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956392

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MICHELE GUTE

Mailing Address 112 PORCH LIGHT DRIVE

City State Zip Code
HUXLEY IA 50124-9500

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962709

Amount of Each Receipt this Period

30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

115.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 858 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DR. HERBERT C. GUTHRIE		Date of Receipt MM / DD / YYYY 11 / 01 / 2010		
	Mailing Address 101 FAIRWAY DR.		Transaction ID: SA11.13963698		
	City ZEBULON	State NC	Zip Code 27597-9162	Amount of Each Receipt this Period 35.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
	Name of Employer SELF-EMPLOYED	Occupation DENTIST	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Aggregate Year-to-Date ▼
230.00

B.	Full Name (Last, First, Middle Initial) ADOLFO ARTURO GUZMAN		Date of Receipt MM / DD / YYYY 10 / 19 / 2010		
	Mailing Address 12135 ACADEMY RD UNIT 20		Transaction ID: SA11.13941133		
	City PHILADELPHIA	State PA	Zip Code 19154-2941	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
	Name of Employer CATALENT	Occupation PACKER	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Aggregate Year-to-Date ▼
345.00

C.	Full Name (Last, First, Middle Initial) ADOLFO ARTURO GUZMAN		Date of Receipt MM / DD / YYYY 10 / 28 / 2010		
	Mailing Address 12135 ACADEMY RD UNIT 20		Transaction ID: SA11.13959534		
	City PHILADELPHIA	State PA	Zip Code 19154-2941	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
	Name of Employer CATALENT	Occupation PACKER	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Aggregate Year-to-Date ▼
345.00

SUBTOTAL of Receipts This Page (optional)	55.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 859 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
ADOLFO ARTURO GUZMAN

Mailing Address 12135 ACADEMY RD UNIT 20

City State Zip Code
PHILADELPHIA PA 19154-2941

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CATALENT PACKER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 345.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13971224

Amount of Each Receipt this Period

10.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. LOUIS A. GUZZETTI, JR.

Mailing Address 90 FERRIS HILL RD.

City State Zip Code
NEW CANAAN CT 06840-3822

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SPINNAKER COATING, LLC CHAIRMAN & CEO

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 550.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 1 0

Transaction ID: SA11.13947670

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
BARBARA C. GWYN

Mailing Address 20 FAIRWAY OAKS LANE

City State Zip Code
ISLE OF PALMS SC 29451-3835

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 267.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918892

Amount of Each Receipt this Period

39.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

149.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 860 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. MARY HAAG

Mailing Address 7171 COUNTRY CLUB DR

City State Zip Code
LA JOLLA CA 92037-5612

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929130

Amount of Each Receipt this Period
80.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. BARBARA HAALAND

Mailing Address 901 AVENIDA LAS VISTAS

City State Zip Code
LOS LUNAS NM 87031-8364

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 355.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918636

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. MARTHA R. HAAS

Mailing Address 5000 SW 83RD ST.

City State Zip Code
MIAMI FL 33143-8510

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953010

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **355.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 861 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. WALTER HAASE

Mailing Address 6501 WOODLAKE DRIVE
APARTMENT 305

City State Zip Code
RICHFIELD MN 55423-1393

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928927

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
LAWRENCE HABER

Mailing Address 5 LIMEHOUSE ST

City State Zip Code
CHARLESTON SC 29401-2305

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1751.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933025

Amount of Each Receipt this Period

501.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. KINLEY HACK

Mailing Address 2749 WESTERN AVE

City State Zip Code
BEDFORD IN 47421-5234

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13962054

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

651.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 862 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. CAROL S. HACKETT		Date of Receipt
	Mailing Address 550 HAVEN DR APT 305		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City ARCHBOLD	State OH	Zip Code 43502-3242
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13959441
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation INFORMATION REQUESTED PER BEST EFFORTS Aggregate Year-to-Date ▼ <input type="text" value="261.00"/>	CONTRIBUTION <input type="text" value="25.00"/>

B.	Full Name (Last, First, Middle Initial) RICHARD HADDRILL		Date of Receipt
	Mailing Address 9709 WINTER PALACE DR.		<input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City LAS VEGAS	State NV	Zip Code 89145-8637
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13947021
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation INFORMATION REQUESTED PER BEST EFFORTS Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	CONTRIBUTION <input type="text" value="1000.00"/>

C.	Full Name (Last, First, Middle Initial) MS. MARGARET D. HADEN		Date of Receipt
	Mailing Address 19596 IRONSIDE DR		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City APPLE VALLEY	State CA	Zip Code 92308-9337
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13947859
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation INFORMATION REQUESTED PER BEST EFFORTS Aggregate Year-to-Date ▼ <input type="text" value="275.00"/>	CONTRIBUTION <input type="text" value="50.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1075.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 863 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. ELSA HADIK
 Mailing Address 9013B AYRDALE CRES
 City PHILADELPHIA State PA Zip Code 19128-1048
 Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13932119
 Amount of Each Receipt this Period 25.00
 CONTRIBUTION
 FEC ID number of contributing federal political committee. C
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

B. Full Name (Last, First, Middle Initial)
MR. FRANK E. HADLEY
 Mailing Address 39 TENERIFE WAY
 City HOT SPRINGS State AR Zip Code 71909-5439
 Date of Receipt 11 / 22 / 2010
Transaction ID: SA11.13972832
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION
 FEC ID number of contributing federal political committee. C
 Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

C. Full Name (Last, First, Middle Initial)
MRS. VIRGINA HAFEKEN
 Mailing Address 305 GREEN HOLLOW DR
 City ISELIN State NJ Zip Code 08830-2922
 Date of Receipt 11 / 19 / 2010
Transaction ID: SA11.13971013
 Amount of Each Receipt this Period 90.00
 CONTRIBUTION
 FEC ID number of contributing federal political committee. C
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

SUBTOTAL of Receipts This Page (optional) ► 215.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 864 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM HAFEMAN

Mailing Address 22120 N. GOLF CLUB DRIVE

City State Zip Code
SUN CITY WEST AZ 85375-2078

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935194

Amount of Each Receipt this Period
75.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM HAFEMAN

Mailing Address 22120 N. GOLF CLUB DRIVE

City State Zip Code
SUN CITY WEST AZ 85375-2078

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948826

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DOROTHY HAFLIGER

Mailing Address 26340 RIC VISTA DR

City State Zip Code
HEMET CA 92544-6764

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931622

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **225.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 865 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MARY C. HAGAN

Mailing Address 1 CAREY DR

City State Zip Code
AMBLER PA 19002-5416

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	1	0

Transaction ID: SA11.13970055

Amount of Each Receipt this Period
125.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. SIDNEY L. HAGAN

Mailing Address 1300 MEADOWVIEW DRIVE

City State Zip Code
MIAMISBURG OH 45342-3210

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
651.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	1	0

Transaction ID: SA11.13948517

Amount of Each Receipt this Period
101.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. RICHARD HAGEDORN

Mailing Address 5054 GRAY RD.

City State Zip Code
CINCINNATI OH 45232-1514

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	2	/	2	0	1	0

Transaction ID: SA11.13968235

Amount of Each Receipt this Period
105.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **331.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 866 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. DUANE W. HAGER	Date of Receipt MM / DD / YYYY 11 / 05 / 2010
	Mailing Address P.O. BOX 1414	Transaction ID: SA11.13966165
	City State Zip Code VICTORVILLE CA 92393-1414	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

B.	Full Name (Last, First, Middle Initial) MR. DUANE W. HAGER	Date of Receipt MM / DD / YYYY 11 / 05 / 2010
	Mailing Address P.O. BOX 1414	Transaction ID: SA11.13966246
	City State Zip Code VICTORVILLE CA 92393-1414	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

C.	Full Name (Last, First, Middle Initial) MR. GEORGE J. HAHN	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address P.O. BOX 4	Transaction ID: SA11.13918670
	City State Zip Code THENDARA NY 13472-0004	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SELF-EMPLOYED MACHINE SHOP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

SUBTOTAL of Receipts This Page (optional)	200.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 867 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GEORGE J. HAHL

Mailing Address P.O. BOX 4

City State Zip Code
THENDARA NY 13472-0004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED MACHINE SHOP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13931384

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BRIAN HAHN

Mailing Address 3028 PROVENCE LN

City State Zip Code
MUSCATINE IA 52761-2795

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BUILDERS SAND AND CEMENT CO. MANAGER/PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930343

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. BRIAN HAHN

Mailing Address 3028 PROVENCE LN

City State Zip Code
MUSCATINE IA 52761-2795

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BUILDERS SAND AND CEMENT CO. MANAGER/PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949037

Amount of Each Receipt this Period
30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **105.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 868 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. BRIAN HAHN

Mailing Address 3028 PROVENCE LN

City State Zip Code
MUSCATINE IA 52761-2795

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BUILDERS SAND AND CEMENT CO. MANAGER/PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949668

Amount of Each Receipt this Period
20.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. DARLEAN L. HAHN

Mailing Address 5259 101ST. RD. NW

City State Zip Code
TIOGA ND 58852-9301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1025.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949234

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. DARLEAN L. HAHN

Mailing Address 5259 101ST. RD. NW

City State Zip Code
TIOGA ND 58852-9301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1025.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959781

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 220.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 869 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOHN C. HAID

Mailing Address 1511 COLORADO AVE

City LYNN HAVEN State FL Zip Code 32444-4025

FEC ID number of contributing federal political committee. **C**

Name of Employer HAID ELECTRIC Occupation ELECTRICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt 11 / 01 / 2010
Transaction ID: SA11.13960760
Amount of Each Receipt this Period 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ALAN R. HAIGHT

Mailing Address P.O. BOX 3811

City SUNRIVER State OR Zip Code 97707-0811

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13950545
Amount of Each Receipt this Period 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MAC HAIK

Mailing Address 11757 KATY FWY. STE. 1500 STE 1500

City HOUSTON State TX Zip Code 77079-1727

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation INVESTMENTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 21 / 2010
Transaction ID: SA11.13945841
Amount of Each Receipt this Period 150.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 350.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 870 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. BARRY HAIMES

Mailing Address 21 E POINT LN

City State Zip Code
OLD GREENWICH CT 06870-2403

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SAGE ASSET MANAGMENT PORTFOLIO MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
10 / 20 / 2010

Transaction ID: SA11.13944665

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CYNTHIA HALABY

Mailing Address 37 SUNSET DRIVE

City State Zip Code
ENGLEWOOD CO 80113-4031

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
11 / 05 / 2010

Transaction ID: SA11.13977509

Amount of Each Receipt this Period
-1000.00

CONTRIBUTION

CHARGED BACK

C. Full Name (Last, First, Middle Initial)
JULIE HALCOMB

Mailing Address 7558 W COUNTY ROAD 650 S

City State Zip Code
CONNERSVILLE IN 47331-8643

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS OFFICE MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
MM / DD / YYYY
10 / 14 / 2010

Transaction ID: SA11.13918695

Amount of Each Receipt this Period
75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **-825.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 871 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
CHARLES L. HALDER
Mailing Address 14155 510TH ST
City POCAHONTAS State IA Zip Code 50574-8655
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 365.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13935514
Amount of Each Receipt this Period 80.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CHARLES L. HALDER
Mailing Address 14155 510TH ST
City POCAHONTAS State IA Zip Code 50574-8655
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 365.00
Date of Receipt 10 / 25 / 2010
Transaction ID: SA11.13954497
Amount of Each Receipt this Period 80.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. ALTA L. HALE
Mailing Address 105 CLAREMORE CT
City LITTLE ROCK State AR Zip Code 72227-3800
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 295.00
Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13931621
Amount of Each Receipt this Period 85.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 245.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 872 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. BRETT M. HALE

Mailing Address 9223 TOWER PINES COVE

City OOLTEWAH State TN Zip Code 37363-9347

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13931813
 Amount of Each Receipt this Period: 150.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAYTON HALE

Mailing Address 1718 3RD ST

City TUSCALOOSA State AL Zip Code 35401-1102

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 11 / 03 / 2010
Transaction ID: SA11.13964414
 Amount of Each Receipt this Period: 200.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. JONNIE S. HALE

Mailing Address 1032 E ELM ST

City HILLSBORO State TX Zip Code 76645-2640

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER
Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt: 10 / 14 / 2010
Transaction ID: SA11.13930097
 Amount of Each Receipt this Period: 25.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 375.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 873 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MONA D. HALE

Mailing Address 3610 5TH AVE

City State Zip Code
CORONA DEL MAR CA 92625-2537

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13938120

Amount of Each Receipt this Period 80.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MONA D. HALE

Mailing Address 3610 5TH AVE

City State Zip Code
CORONA DEL MAR CA 92625-2537

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959560

Amount of Each Receipt this Period 80.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
STEVEN HALES

Mailing Address 1615 LYTTLETON ST

City State Zip Code
CAMDEN SC 29020-2906

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918876

Amount of Each Receipt this Period 250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 410.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 874 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. BOB HALEY

Mailing Address 1095 WINDMILL STREET

City State Zip Code
GRENADA MS 38901-9310

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 01 / 2010

Transaction ID: SA11.13960784

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. DENNIS R. HALEY

Mailing Address 1601 AVENUE F

City State Zip Code
LUBBOCK TX 79401-5238

FEC ID number of contributing federal political committee. **C**

Name of Employer
SELF-EMPLOYED

Occupation

OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 27 / 2010

Transaction ID: SA11.13955870

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. HARRY J. HALEY

Mailing Address 156 A WEST BROADWAY

City State Zip Code
PORT JEFFERSON NY 11777

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 21 / 2010

Transaction ID: SA11.13946978

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

235.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 875 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. LUKE HALINSKI

Mailing Address 101 HEDGEROW WAY

City State Zip Code
LANSDALE PA 19446-5071

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
VOLUNTEER VOLUNTEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13946196

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BETTY JEAN HALL

Mailing Address 24790 GRAND TRAVERSE AVE

City State Zip Code
FLAT ROCK MI 48134-8055

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
11 / 16 / 2010

Transaction ID: SA11.13969300

Amount of Each Receipt this Period
75.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HAROLD G. HALL

Mailing Address 20885 HUFFMASTER RD

City State Zip Code
N FT MYERS FL 33917-4625

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13950580

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **425.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 876 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. HAZEL R. HALL

Mailing Address 511 S. PARK ROAD
APT 228

City State Zip Code
SPOKANE VALLEY WA 99212-0556

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 306.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954860

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. HAZEL R. HALL

Mailing Address 511 S. PARK ROAD
APT 228

City State Zip Code
SPOKANE VALLEY WA 99212-0556

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 306.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954972

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. HOWARD C. HALL

Mailing Address 344 NORTH STREET

City State Zip Code
GREENWICH CT 06830-3930

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 365.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937116

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 877 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES A. HALL

Mailing Address 819 CREEK WOOD WAY

City State Zip Code
HOUSTON TX 77024-3023

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EXXON MOBIL CORP. FINANCIAL MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 1 0

Transaction ID: SA11.13947673

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MARY L. HALL

Mailing Address 14388 CANALVIEW DR APT A

City State Zip Code
DELRAY BEACH FL 33484-2678

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 941.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944699

Amount of Each Receipt this Period
120.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. MARY L. HALL

Mailing Address 14388 CANALVIEW DR APT A

City State Zip Code
DELRAY BEACH FL 33484-2678

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 941.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948822

Amount of Each Receipt this Period
120.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 490.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 878 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. MILDRED L. HALL

Mailing Address 7255 E BROADWAY RD APT 297

City MESA State AZ Zip Code 85208-9208

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt 10 / 26 / 2010

Transaction ID: SA11.13956566

Amount of Each Receipt this Period 15.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MILDRED L. HALL

Mailing Address 7255 E BROADWAY RD APT 297

City MESA State AZ Zip Code 85208-9208

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt 11 / 01 / 2010

Transaction ID: SA11.13963395

Amount of Each Receipt this Period 15.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. NANCY S. HALL

Mailing Address 8431 N SHADOW WASH WAY

City TUCSON State AZ Zip Code 85743-7474

FEC ID number of contributing federal political committee. **C**

Name of Employer LIBERTY TAX SERVICE Occupation MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 27 / 2010

Transaction ID: SA11.13959376

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1030.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 879 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT C. HALL

Mailing Address 1536 E OVERLOOK RD

City State Zip Code
MONTEREY TN 38574-7207

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
11 / 08 / 2010

Transaction ID: SA11.13966739

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. RUTH HALL

Mailing Address 22806 CHARDONNAY DR. UNIT 1
UNIT 1

City State Zip Code
DIAMOND BAR CA 91765-4190

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
251.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13946812

Amount of Each Receipt this Period
26.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOHN HALLAM

Mailing Address 11204 OLD CLUB RD.

City State Zip Code
ROCKVILLE MD 20852-4535

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13935275

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **376.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 880 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL L. HALLAS

Mailing Address 1303 JACKSON ST

City State Zip Code
HOLLYWOOD FL 33019-1521

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954953

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
VIRGINIA B. HALLAM

Mailing Address 11204 OLD CLUB RD.

City State Zip Code
ROCKVILLE MD 20852-4535

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949691

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RONALD HALLMAN

Mailing Address 17785 FOOTHILL CT

City State Zip Code
HIDDEN VALLEY LAKE CA 95467-8027

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13931363

Amount of Each Receipt this Period
60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 360.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 881 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. JOHN O. HALLQUIST	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 1 0
	Mailing Address P.O. BOX 712	Transaction ID: SA11.13943361
	City State Zip Code LIVERMORE CA 94551-0712	Amount of Each Receipt this Period 480.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer LSTC	Occupation MECHANICAL ENGINEER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1280.00	

B.	Full Name (Last, First, Middle Initial) MR. JOE A. HALTER	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 1 0
	Mailing Address 3587 E DIAMOND DR.	Transaction ID: SA11.13931356
	City State Zip Code VINCENNES IN 47591-6172	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

C.	Full Name (Last, First, Middle Initial) MR. BERNARD H. HAMILTON	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	Mailing Address 1001 JOSEPHINE CRES	Transaction ID: SA11.13947753
	City State Zip Code VIRGINIA BEACH VA 23464-3918	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

SUBTOTAL of Receipts This Page (optional)	560.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 882 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
C HAMILTON

Mailing Address P.O. BOX 632

City State Zip Code
WEAVERVILLE CA 96093-0632

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 235.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946316

Amount of Each Receipt this Period

40.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JAMES M. HAMILTON

Mailing Address 2820 W MILL RD.

City State Zip Code
EVANSVILLE IN 47720-1130

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 352.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949910

Amount of Each Receipt this Period

20.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JAMES M. HAMILTON

Mailing Address 2820 W MILL RD.

City State Zip Code
EVANSVILLE IN 47720-1130

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 352.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950158

Amount of Each Receipt this Period

20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 883 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
KERN HAMILTON

Mailing Address 800 BLOSSOM HILL RD UNIT E324

City State Zip Code
LOS GATOS CA 95032-3568

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941137

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. MARY S. HAMILTON

Mailing Address 1513 NEW PROVIDENCE DRIVE

City State Zip Code
MARYVILLE TN 37803-5931

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13962197

Amount of Each Receipt this Period
80.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PAUL R. HAMILTON

Mailing Address 413 W CREEK ST

City State Zip Code
FREDERICKSBURG TX 78624-3113

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 1 0

Transaction ID: SA11.13965594

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **680.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 884 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. THOMAS D. HAMILTON

Mailing Address 1505 ELM ST

City State Zip Code
MORGAN CITY LA 70380-1821

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PHARMACIST

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 1 0

Transaction ID: SA11.13966240

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. HAROLD HAMM

Mailing Address PO BOX 1032

City State Zip Code
ENID OK 73702-1032

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CONTINENTAL RESOURCES INC. CHAIRMAN & CEO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13948210

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM H. HAMM

Mailing Address 3281 JACKSON ST

City State Zip Code
SAN FRANCISCO CA 94118-2016

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930398

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **2775.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 885 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. HOWARD F. HAMMACK

Mailing Address 2122 GOLDEN EAGLE DR. W

City State Zip Code
TALLAHASSEE FL 32312-4036

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 467.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13943761
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. HOWARD F. HAMMACK

Mailing Address 2122 GOLDEN EAGLE DR. W

City State Zip Code
TALLAHASSEE FL 32312-4036

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 467.00

Date of Receipt: 11 / 22 / 2010
Transaction ID: SA11.13973003
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT L. HAMMERSCHMIDT

Mailing Address 890 PINE GROVE CT

City State Zip Code
WHEATON IL 60187-3276

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 610.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA11.13931282
Amount of Each Receipt this Period: 150.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 250.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 886 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. JANE HAMMOND

Mailing Address 12117 CREEKHAVEN DR

City State Zip Code
DES PERES MO 63131-3824

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 725.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943548

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. JANE HAMMOND

Mailing Address 12117 CREEKHAVEN DR

City State Zip Code
DES PERES MO 63131-3824

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 725.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944354

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. JANE HAMMOND

Mailing Address 12117 CREEKHAVEN DR

City State Zip Code
DES PERES MO 63131-3824

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 725.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13972849

Amount of Each Receipt this Period
75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **275.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 887 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. STEVEN L. HAMMOND

Mailing Address 7240 W H AVE

City State Zip Code
KALAMAZOO MI 49009-8586

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 660.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949789

Amount of Each Receipt this Period
210.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. STEVEN L. HAMMOND

Mailing Address 7240 W H AVE

City State Zip Code
KALAMAZOO MI 49009-8586

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 660.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13960210

Amount of Each Receipt this Period
150.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. TRISH HAMMONS

Mailing Address 470 COUNTY ROAD 237

City State Zip Code
ARMSTRONG MO 65230-9725

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949977

Amount of Each Receipt this Period
20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **380.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 888 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. TRISH HAMMONS

Mailing Address 470 COUNTY ROAD 237

City State Zip Code
ARMSTRONG MO 65230-9725

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	6	/	2	0	1	0

Transaction ID: SA11.13957419

Amount of Each Receipt this Period
20.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILTON N. HAMMOND

Mailing Address 3805 CRESTWOOD TERRACE # 410

City State Zip Code
FORT WORTH TX 76107-1139

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2005.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	1	0

Transaction ID: SA11.13940592

Amount of Each Receipt this Period
300.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILTON N. HAMMOND

Mailing Address 3805 CRESTWOOD TERRACE # 410

City State Zip Code
FORT WORTH TX 76107-1139

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2005.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13954371

Amount of Each Receipt this Period
300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **620.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 889 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WILTON N. HAMMOND

Mailing Address 3805 CRESTWOOD TERRACE
410

City State Zip Code
FORT WORTH TX 76107-1139

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2005.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 1 0

Transaction ID: SA11.13972139

Amount of Each Receipt this Period
300.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PAULINE HAMOND

Mailing Address 7201 PROSPECT PL. NE, APT. 232

City State Zip Code
ALBUQUERQUE NM 87110-4244

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 389.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936801

Amount of Each Receipt this Period
90.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PAULINE HAMOND

Mailing Address 7201 PROSPECT PL. NE, APT. 232

City State Zip Code
ALBUQUERQUE NM 87110-4244

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 389.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946307

Amount of Each Receipt this Period
60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **450.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 890 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) PAULINE HAMOND	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 7201 PROSPECT PL. NE, APT. 232	Transaction ID: SA11.13952966
	City State Zip Code ALBUQUERQUE NM 87110-4244	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 389.00	

B.	Full Name (Last, First, Middle Initial) GEOFFREY HAMWAY	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 7112 E. BRONCO DRIVE	Transaction ID: SA11.13955650
	City State Zip Code PARADISE VALLEY AZ 85253-3186	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

C.	Full Name (Last, First, Middle Initial) MR. HUGH E. HANAGAN	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address P.O. BOX 1737	Transaction ID: SA11.13940211
	City State Zip Code ROSWELL NM 88202-1737	Amount of Each Receipt this Period 120.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation SELF-EMPLOYED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

SUBTOTAL of Receipts This Page (optional)	470.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 891 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. HUGH E. HANAGAN

Mailing Address P.O. BOX 1737

City State Zip Code
ROSWELL NM 88202-1737

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956340

Amount of Each Receipt this Period
150.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MARGRIT G. HANCHER

Mailing Address 508 OLD AUSTIN HWY. APT. 304

City State Zip Code
BASTROP TX 78602-5105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948952

Amount of Each Receipt this Period
20.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. MARGRIT G. HANCHER

Mailing Address 508 OLD AUSTIN HWY. APT. 304

City State Zip Code
BASTROP TX 78602-5105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13972766

Amount of Each Receipt this Period
20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 190.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 892 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. JANICE HANCOCK

Mailing Address 47 SAND CASTLE DR

City State Zip Code
NEBO NC 28761-4729

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	4	/	2	0	1	0

Transaction ID: SA11.13965803

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. JEANETTE HANCOCK

Mailing Address 2353 COUNTY ROAD 1219

City State Zip Code
BLANCHARD OK 73010-2820

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	2	/	2	0	1	0

Transaction ID: SA11.13972816

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. THOMAS E. HANES

Mailing Address 5223 HEATHROW HILLS DR

City State Zip Code
BRENTWOOD TN 37027-6548

FEC ID number of contributing federal political committee. **C**

Name of Employer PATH GROUP
Occupation PATHOLOGIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	1	0

Transaction ID: SA11.13949544

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **300.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 893 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. THOMAS E. HANES	Date of Receipt MM / DD / YYYY 11 / 22 / 2010
	Mailing Address 5223 HEATHROW HILLS DR	Transaction ID: SA11.13972831
	City State Zip Code BRENTWOOD TN 37027-6548	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation PATH GROUP PATHOLOGIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

B.	Full Name (Last, First, Middle Initial) MRS. BEA P. HANEY	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address P.O. BOX 86	Transaction ID: SA11.13957370
	City State Zip Code CHIRENO TX 75937-0086	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 535.00	

C.	Full Name (Last, First, Middle Initial) MR. KIRK HANEY	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 18425 CALLE LA SERRA	Transaction ID: SA11.13945645
	City State Zip Code RANCHO SANTA FE CA 92091-0139	Amount of Each Receipt this Period 7000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SG BIOFUELS, INC. CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7000.00	

SUBTOTAL of Receipts This Page (optional)	7275.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 894 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. DORIS M. HANKE

Mailing Address 16W320 94TH PL

City State Zip Code
BURR RIDGE IL 60527-6806

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13942197

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. DORIS M. HANKE

Mailing Address 16W320 94TH PL

City State Zip Code
BURR RIDGE IL 60527-6806

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Transaction ID: SA11.13968414

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PETER J. HANLON

Mailing Address
45 CALHOUN DR.

City State Zip Code
GREENWICH CT 06831

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1772.66

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11A.13977530

Amount of Each Receipt this Period
1772.66

IN-KIND CONTRIBUTION

IN-KIND: FOOD AND BEVERAGE

SUBTOTAL of Receipts This Page (optional) ► **1872.66**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 895 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CECIL W. HANNAFORD

Mailing Address 1940 TRUMBULL DR.

City ATLANTA State GA Zip Code 30338-4329

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13939137

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MARTHA N. HANNA

Mailing Address 2154 CIRCULAR RD

City TOLEDO State OH Zip Code 43614-4205

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 351.00

Date of Receipt MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13934284

Amount of Each Receipt this Period
26.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. MARTHA N. HANNA

Mailing Address 2154 CIRCULAR RD

City TOLEDO State OH Zip Code 43614-4205

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 351.00

Date of Receipt MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13953265

Amount of Each Receipt this Period
30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 106.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 896 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. MARTHA N. HANNA

Mailing Address 2154 CIRCULAR RD

City TOLEDO State OH Zip Code 43614-4205

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 351.00

Date of Receipt 11 / 18 / 2010
Transaction ID: SA11.13971302
 Amount of Each Receipt this Period 30.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MITCHELL J. HANNA

Mailing Address 22410 EGBERT HILL RD

City GRASS VALLEY State CA Zip Code 95949-8997

FEC ID number of contributing federal political committee. **C**

Name of Employer SUTTER HEALTH Occupation HOSPITAL ADAUNISTRATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 01 / 2010
Transaction ID: SA11.13963668
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MISS PEGGY HANNA

Mailing Address 232 ARGO AVE

City SAN ANTONIO State TX Zip Code 78209-5113

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt 10 / 28 / 2010
Transaction ID: SA11.13960630
 Amount of Each Receipt this Period 25.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 155.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 897 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MISS PEGGY HANNA
Mailing Address 232 ARGO AVE
City SAN ANTONIO State TX Zip Code 78209-5113
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 245.00
Date of Receipt 11 / 22 / 2010
Transaction ID: SA11.13973221
Amount of Each Receipt this Period 25.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ARLENE R. HANSEN
Mailing Address 460 BASELINE RD.
City WALNUT State IL Zip Code 61376-9604
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13934841
Amount of Each Receipt this Period 160.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CHARLES E. HANSEN
Mailing Address 313 N TAYLOR ST.
City GUNNISON State CO Zip Code 81230-2135
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 215.00
Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13949635
Amount of Each Receipt this Period 40.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 225.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 898 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. EMIL HANSEN	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 15705 14TH ST. SE	Transaction ID: SA11.13964412
	City State Zip Code HUNTER ND 58048-9748	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

B.	Full Name (Last, First, Middle Initial) MR. EUGENE HANSEN	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 1607 YALECREST AVE	Transaction ID: SA11.13955850
	City State Zip Code SALT LAKE CITY UT 84105-1723	Amount of Each Receipt this Period 510.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1620.00	

C.	Full Name (Last, First, Middle Initial) MR. HAL T. HANSEN	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 5000 ROYAL MARCO WAY UNIT 635 APT. 635	Transaction ID: SA11.13948936
	City State Zip Code MARCO ISLAND FL 34145-7802	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	810.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 899 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. J ARTHUR HANSEN

Mailing Address 95 SKIDAWAY ISLAND PARK RD
UNIT 50

City SAVANNAH State GA Zip Code 31411-1123

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13955042
 Amount of Each Receipt this Period: 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
J. ARTHUR HANSEN

Mailing Address 95 SKIDAWAY ISLAND PARK RD UNI

City SAVANNAH State GA Zip Code 31411-1116

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 10 / 29 / 2010
Transaction ID: SA11.13961696
 Amount of Each Receipt this Period: 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. POLLY B. HANSEN

Mailing Address 220 ROBLEDO VERDE ST

City SAN ANTONIO State TX Zip Code 78232-1114

FEC ID number of contributing federal political committee. **C**

Name of Employer MTS RADIOLOGY ASSOC Occupation RADIOLOGIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13933022
 Amount of Each Receipt this Period: 201.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 401.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 900 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DAVID H. HANSON

Mailing Address 1803 SPRINGVIEW DR

City MASON CITY State IA Zip Code 50401-4761

FEC ID number of contributing federal political committee. **C**

Name of Employer MERCY MED CENTER NORTH IO-WA Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13945276
Amount of Each Receipt this Period: 250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHN C. HANSON, II

Mailing Address 2101 FAIRFAX ST

City COLLEGE STATION State TX Zip Code 77845-5604

FEC ID number of contributing federal political committee. **C**

Name of Employer TEXAS A&M Occupation PROFESSOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1650.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13939188
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOHN C. HANSON, II

Mailing Address 2101 FAIRFAX ST

City COLLEGE STATION State TX Zip Code 77845-5604

FEC ID number of contributing federal political committee. **C**

Name of Employer TEXAS A&M Occupation PROFESSOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1650.00

Date of Receipt: 11 / 16 / 2010
Transaction ID: SA11.13969228
Amount of Each Receipt this Period: 200.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 550.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 901 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MICHAEL HANSON

Mailing Address
325 7TH ST. NW SUITE 400

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
C2 GROUP LLC PARTNER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
MM / DD / YYYY
10 / 14 / 2010

Transaction ID: SA11A.13977527

Amount of Each Receipt this Period
250.00

IN-KIND CONTRIBUTION

IN-KIND: FOOD AND BEVERAGE

B. Full Name (Last, First, Middle Initial)
R. ALAN HANSON

Mailing Address 1265 PASEO REDONDO

City State Zip Code
BURBANK CA 91501-1654

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 740.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13931485

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RICHARD C. HANSON

Mailing Address 2084 DESOTO ST

City State Zip Code
MAPLEWOOD MN 55117-2010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 476.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13932609

Amount of Each Receipt this Period
51.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 401.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 902 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RICHARD C. HANSON

Mailing Address 2084 DESOTO ST

City State Zip Code
MAPLEWOOD MN 55117-2010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 476.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946540

Amount of Each Receipt this Period
CONTRIBUTION 50.00

B. Full Name (Last, First, Middle Initial)
MR. RICHARD C. HANSON

Mailing Address 2084 DESOTO ST

City State Zip Code
MAPLEWOOD MN 55117-2010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 476.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13972752

Amount of Each Receipt this Period
CONTRIBUTION 40.00

C. Full Name (Last, First, Middle Initial)
MR. LARRY E. HANTHORN

Mailing Address 1317 E 6TH. ST.

City State Zip Code
PELLA IA 50219-1352

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MICROSOFT CORP. MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959662

Amount of Each Receipt this Period
CONTRIBUTION 160.00

SUBTOTAL of Receipts This Page (optional) ► 250.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 903 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. BENJAMIN H. HARDAWAY, II		Date of Receipt
	Mailing Address 8301 BIG SHINN RD.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 20 / 2010
	City	State	Zip Code
	MIDLAND	GA	31820-3610
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13944694
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 1000.00	<input type="text"/> 1000.00
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MR. THOMAS D. HARDEMAN		Date of Receipt
	Mailing Address 104 OAKWATER DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 15 / 2010
	City	State	Zip Code
	LAFAYETTE	LA	70503-2228
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13928116
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 225.00	<input type="text"/> 75.00
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) ADELE HARDIN		Date of Receipt
	Mailing Address 9224 WESTION DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 24 / 2010
	City	State	Zip Code
	BRENTWOOD	TN	37027-7498
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13947740
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 250.00	<input type="text"/> 250.00
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1325.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 904 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
CHARLES P. HARDING

Mailing Address 230 INGLEWOOD DR

City State Zip Code
MORGANTON NC 28655-3638

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13937200
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CHARLES P. HARDING

Mailing Address 230 INGLEWOOD DR

City State Zip Code
MORGANTON NC 28655-3638

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13948587
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES F. HARDIN, JR.

Mailing Address 2330 BEAU CHENE

City State Zip Code
BILOXI MS 39532-3134

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13951132
Amount of Each Receipt this Period: 1000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1090.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 905 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DR. JOHN C. HARDIN, JR.

Mailing Address 410 BRIARWOOD DRIVE

City State Zip Code
SHREVEPORT LA 71106-1804

FEC ID number of contributing federal political committee. **C**

Name of Employer
LOUISIANA STATE MEDICAL SCHOOL

Occupation
PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941761

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. TIM HARDING

Mailing Address 15696 HARDING RD.

City State Zip Code
BRYAN TX 77807-4121

FEC ID number of contributing federal political committee. **C**

Name of Employer
HARDING ROAD BORING INC.

Occupation
DITCH-DIGGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
780.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13927345

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. EILENE HARDT

Mailing Address 19060 OTTO CT

City State Zip Code
NEW BOSTON MI 48164-9291

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955833

Amount of Each Receipt this Period

60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

660.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 906 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES D. HARGRAVE

Mailing Address 20 OLIPHANTS MILL RD

City State Zip Code
SWEDESBORO NJ 08085-3121

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 219.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949043

Amount of Each Receipt this Period
55.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILHO HARJU

Mailing Address 16 FRANCE ST

City State Zip Code
CARVER MA 02330-1303

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955415

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. DOROTHY HARKNESS

Mailing Address 925 IRVING DR.

City State Zip Code
BURBANK CA 91504-1836

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 810.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961878

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 205.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 907 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
VICTOR A. HARLAM

Mailing Address 6551 FALLS CHURCH ST

City State Zip Code
SAN ANTONIO TX 78247-1031

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 293.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939841

Amount of Each Receipt this Period
1.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILLIAM M. HARLAN

Mailing Address 118 W MARYLAND AVE APT. 114

City State Zip Code
PHOENIX AZ 85013-1243

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935132

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WILLIAM M. HARLAN

Mailing Address 118 W MARYLAND AVE APT. 114

City State Zip Code
PHOENIX AZ 85013-1243

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943638

Amount of Each Receipt this Period
60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **111.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 908 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) WILLIAM M. HARLAN</p> <p>Mailing Address 118 W MARYLAND AVE APT. 114</p> <p>City State Zip Code PHOENIX AZ 85013-1243</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer INFORMATION REQUESTED PER BEST EFFORTS</p> <p>Occupation INFORMATION REQUESTED PER BEST EFFORTS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 370.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0</p> <p>Transaction ID: SA11.13948825</p> <p>Amount of Each Receipt this Period 60.00</p> <p>CONTRIBUTION</p>
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<p>B. Full Name (Last, First, Middle Initial) WILLIAM M. HARLAN</p> <p>Mailing Address 118 W MARYLAND AVE APT. 114</p> <p>City State Zip Code PHOENIX AZ 85013-1243</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer INFORMATION REQUESTED PER BEST EFFORTS</p> <p>Occupation INFORMATION REQUESTED PER BEST EFFORTS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 370.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 8 / 2 0 1 0</p> <p>Transaction ID: SA11.13971358</p> <p>Amount of Each Receipt this Period 50.00</p> <p>CONTRIBUTION</p>
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<p>C. Full Name (Last, First, Middle Initial) WILLIAM M. HARLAN</p> <p>Mailing Address 118 W MARYLAND AVE APT. 114</p> <p>City State Zip Code PHOENIX AZ 85013-1243</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer INFORMATION REQUESTED PER BEST EFFORTS</p> <p>Occupation INFORMATION REQUESTED PER BEST EFFORTS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 370.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0</p> <p>Transaction ID: SA11.13972144</p> <p>Amount of Each Receipt this Period 50.00</p> <p>CONTRIBUTION</p>
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SUBTOTAL of Receipts This Page (optional)	160.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 909 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MR. ANDREW HARMAN</p> <p>Mailing Address 4308 BECKLEY RD.</p> <p>City State Zip Code BATTLE CREEK MI 49015-9386</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation ENGINEER</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 260.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 1 0</p> <p>Transaction ID: SA11.13936096</p> <p>Amount of Each Receipt this Period 100.00</p> <p>CONTRIBUTION</p>
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<p>B. Full Name (Last, First, Middle Initial) MR. DARROW O. HARMAN</p> <p>Mailing Address P.O. BOX 218</p> <p>City State Zip Code TAZEWELL VA 24651-0218</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer BUCHANAN COAL CO. Occupation GENERAL PAINTER</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 235.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 1 0</p> <p>Transaction ID: SA11.13945941</p> <p>Amount of Each Receipt this Period 100.00</p> <p>CONTRIBUTION</p>
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<p>C. Full Name (Last, First, Middle Initial) MR. JAMES R. HARMAN</p> <p>Mailing Address 3014 23RD STREET</p> <p>City State Zip Code LUBBOCK TX 79410-2122</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 425.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 1 0</p> <p>Transaction ID: SA11.13941816</p> <p>Amount of Each Receipt this Period 175.00</p> <p>CONTRIBUTION</p>
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SUBTOTAL of Receipts This Page (optional)	375.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 910 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CHARLES E. HARMON

Mailing Address 5555 E 71ST STREET
SUITE 9300

City TULSA State OK Zip Code 74136-6542

FEC ID number of contributing federal political committee. **C**

Name of Employer C.E HARMON INC Occupation PETROLEUM ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2675.00

Date of Receipt 10 / 20 / 2010
Transaction ID: SA11.13945236
Amount of Each Receipt this Period 2500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. DOROTHY W. HARMON

Mailing Address 10 POE ROAD

City CONWAY State AR Zip Code 72032-2104

FEC ID number of contributing federal political committee. **C**

Name of Employer DIMENSION TOOL CO. Occupation SELF-EMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 28 / 2010
Transaction ID: SA11.13958262
Amount of Each Receipt this Period 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. EVERETTE HARMON

Mailing Address 305 S SHERIDAN AVE

City HOLYOKE State CO Zip Code 80734-1217

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 358.00

Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13929395
Amount of Each Receipt this Period 30.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 2630.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 911 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
HENRY N. HARMON

Mailing Address 8028 S MARSHALL ST.

City State Zip Code
LITTLETON CO 80128-5857

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 302.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957285

Amount of Each Receipt this Period
101.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOSEPH HARNETT

Mailing Address 7065 WICK LN APT 208

City State Zip Code
CHAGRIN FALLS OH 44023-1176

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 501.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13938905

Amount of Each Receipt this Period
1.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. TREF HARNOIS

Mailing Address 5057 WHITTIER LN

City State Zip Code
ROCKFORD IL 61114-5410

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939363

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 152.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 912 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
JAMES A. HARP

Mailing Address 630 SNUG HARBOR RD

City State Zip Code
GRANT AL 35747-8120

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13931454

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
ANNE M. HARPER

Mailing Address 6257 TELEGRAPH RD. APT. 232

City State Zip Code
BLOOMFIELD MI 48301-1649

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED MUSIC TEACHER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930924

Amount of Each Receipt this Period

1.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. BENNIE HARRELL

Mailing Address 14468 16TH AVE

City State Zip Code
LEMOORE CA 93245-9517

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13957986

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

151.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 913 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. JULIE B. HARRELL

Mailing Address 2921 CASON ST.

City HOUSTON State TX Zip Code 77005-3915

FEC ID number of contributing federal political committee. **C**

Name of Employer CREATIVE IDEAS Occupation ADMINISTRATIVE ASSISTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt 10 / 26 / 2010

Transaction ID: SA11.13956051

Amount of Each Receipt this Period 1.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. PHYLLIS S. HARRELL

Mailing Address PO BOX 208

City GATESVILLE State NC Zip Code 27938-0208

FEC ID number of contributing federal political committee. **C**

Name of Employer HARRELL MEDICAL TRANSPORT INC. Occupation PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 18 / 2010

Transaction ID: SA11.13928888

Amount of Each Receipt this Period 45.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ANTHONY M. HARRIS

Mailing Address 14852 E. CRESTVIEW COURT

City FOUNTAIN HILLS State AZ Zip Code 85268-3320

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 05 / 2010

Transaction ID: SA11.13966156

Amount of Each Receipt this Period 110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 156.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 914 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CURTIS HARRIS

Mailing Address 2252 BALDY LN

City State Zip Code
EVERGREEN CO 80439-9444

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13940130

Amount of Each Receipt this Period
300.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. DELPHIA P. HARRIS

Mailing Address 7330 DOGWOOD FALLS ROAD

City State Zip Code
HOUSTON TX 77095-4137

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt
MM / DD / YYYY
11 / 08 / 2010

Transaction ID: SA11.13966019

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ELSIE HARRISON

Mailing Address 2978 W MOR DR

City State Zip Code
CLARKSVILLE TN 37043-2401

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 535.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13934761

Amount of Each Receipt this Period
85.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 585.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 915 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. EVA C. HARRIS

Mailing Address P.O. BOX 1333

City State Zip Code
ARDMORE OK 73402-1333

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 261.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936515

Amount of Each Receipt this Period
1.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. FRANK HARRISON

Mailing Address 12901 NORTH WESTERN AVENUE

City State Zip Code
OKLAHOMA CITY OK 73114-1420

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961238

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MAJ. FREDERICK W. HARRINGTON

Mailing Address 4221 SEDONA COURT

City State Zip Code
FARMINGTON NM 87401-9280

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957278

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **2551.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 916 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. GERALD HARRIS	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 36733 HIGH CHAPARRAL	Transaction ID: SA11.13951669
	City State Zip Code MAGNOLIA TX 77355-2848	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

B.	Full Name (Last, First, Middle Initial) MR. GERALD W. HARRIS	Date of Receipt MM / DD / YYYY 11 / 02 / 2010
	Mailing Address 273 LITTLETON QUARTER	Transaction ID: SA11.13964826
	City State Zip Code WILLIAMSBURG VA 23185-5591	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

C.	Full Name (Last, First, Middle Initial) MR. GRANT HARRIS	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 518 W DALLAS ST	Transaction ID: SA11.13955862
	City State Zip Code BROKEN ARROW OK 74012-4029	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

SUBTOTAL of Receipts This Page (optional)	▶	380.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 917 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
HOLT B. HARRISON

Mailing Address 18434 S MISSION HILLS AVE

City State Zip Code
BATON ROUGE LA 70810-7942

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933663

Amount of Each Receipt this Period

750.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DR. J. M. HARRIS

Mailing Address 12243 TEPA WAY

City State Zip Code
LOS ALTOS CA 94022-4515

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SURGEON

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954799

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. JAN E. HARRIS

Mailing Address 1115 EDENHURST CT

City State Zip Code
MONUMENT CO 80132-8484

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MARY KAY COSMETICS NATIONAL SALES DIRECTOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950642

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 918 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DR. JOE R. HARRISON

Mailing Address 404 W MACCLENNY AVE

City State Zip Code
MACCLENNY FL 32063-2036

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation DOCTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931713

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
JOHN HARRIS, III

Mailing Address 921 SHARON DRIVE

City State Zip Code
KINGS MOUNTAIN NC 28086-2735

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation LAND DEVELOPMENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13957631

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. LEON P. HARRIS

Mailing Address 4943 FOXRIDGE ROAD

City State Zip Code
ROANOKE VA 24018-8714

FEC ID number of contributing federal political committee. **C**

Name of Employer KILTECH, INC. Occupation MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13959344

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **3750.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 919 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MYRON L. HARRISON, SR.
Mailing Address 3507 E CREEK CLUB DR
City MISSOURI CITY State TX Zip Code 77459-4101
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13956272
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

Name of Employer: INFORMATION REQUESTED PER BEST EFFORTS
Occupation: INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date: 371.00

B. Full Name (Last, First, Middle Initial)
PRESTON M. HARRINGTON, III
Mailing Address 256 VALLEY RD.
City MONTCLAIR State NJ Zip Code 07042-2353
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 10 / 28 / 2010
Transaction ID: SA11.13959531
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

Name of Employer: RETIRED
Occupation: RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date: 400.00

C. Full Name (Last, First, Middle Initial)
MR. R. JEFFREY HARRIS
Mailing Address 18235 W. BURLEIGH ROAD
City BROOKFIELD State WI Zip Code 53045-2524
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13951150
Amount of Each Receipt this Period: 2000.00
CONTRIBUTION

Name of Employer: SELF-EMPLOYED
Occupation: PRIVATE INVESTOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date: 7000.00

SUBTOTAL of Receipts This Page (optional) ► 2150.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 920 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROGER HARRISON

Mailing Address 1425 BROOKDALE DR

City State Zip Code
NORMAN OK 73072-3221

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UNIVERSITY OF OKLOHOMA PROFESSOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13931365

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RON C. HARRIS

Mailing Address 26701 QUAIL CRK APT 172

City State Zip Code
LAGUNA HILLS CA 92656-3009

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951373

Amount of Each Receipt this Period
110.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. THOMAS HARRISON

Mailing Address 2 GOSHAWK DRIVE

City State Zip Code
LANDRUM SC 29356-3402

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945368

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **235.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 921 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. WALTER D. HARRIS

Mailing Address 607 DELEGAL ST

City State Zip Code
ST SIMONS IS GA 31522-4313

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
541.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946802

Amount of Each Receipt this Period

501.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. WILLIAM R. HARRIS, JR.

Mailing Address PO BOX 829

City State Zip Code
SALISBURY CT 06068

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13951137

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
PHILIP T. HARSHA

Mailing Address 677 OAK GLADE DR.

City State Zip Code
FALLBROOK CA 92028-3693

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954795

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

1701.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 922 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
WILLIAM DAVID HARSHBARGER

Mailing Address 10 LOEFFLER RD.

City BLOOMFIELD State CT Zip Code 06002-2256

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 455.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13943085
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
WILLIAM DAVID HARSHBARGER

Mailing Address 10 LOEFFLER RD.

City BLOOMFIELD State CT Zip Code 06002-2256

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 455.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13949057
Amount of Each Receipt this Period: 60.00
CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
WILLIAM DAVID HARSHBARGER

Mailing Address 10 LOEFFLER RD.

City BLOOMFIELD State CT Zip Code 06002-2256

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 455.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13954707
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 140.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 923 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CHARLES W. HARSTE

Mailing Address 1609 WESTERHAM LOOP

City State Zip Code
TRINITY FL 34655-7156

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951535

Amount of Each Receipt this Period
75.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GARY D. HART

Mailing Address 4612 RENO RD

City State Zip Code
WELLSVILLE KS 66092-8856

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13932079

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN J. HART

Mailing Address 2592 VIENNA ESTATES DR

City State Zip Code
DAYTON OH 45459-1382

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935258

Amount of Each Receipt this Period
30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **130.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 924 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOHN T. HART

Mailing Address 1302 CHANTICLEER LN

City HINSDALE State IL Zip Code 60521-5033

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13951226
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
TOM HART

Mailing Address 95 HOCKANUM BLVD UNIT 4501

City VERNON State CT Zip Code 06066-7003

FEC ID number of contributing federal political committee. **C**

Name of Employer TOWN OF SOUTH WINDSOR Occupation POLICE CAPTAIN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 29 / 2010
Transaction ID: SA11.13959261
Amount of Each Receipt this Period: 90.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. VICKI HART

Mailing Address 3823 FORDHAM ROAD, NW

City WASHINGTON State DC Zip Code 20016-1935

FEC ID number of contributing federal political committee. **C**

Name of Employer HART HEALTH CARE STRATEGIES Occupation OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 25000.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13945627
Amount of Each Receipt this Period: 25000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 25140.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 925 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. STUART E. HARTIGAN

Mailing Address 444 GRANITE AVE

City State Zip Code
MONROVIA CA 91016-2324

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
MM / DD / YYYY
10 / 28 / 2010

Transaction ID: SA11.13957701

Amount of Each Receipt this Period
110.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BARRY HARTMAN

Mailing Address 5408 BONANZA PLACE

City State Zip Code
MISSOULA MT 59808-8624

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AIG BROKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
11 / 03 / 2010

Transaction ID: SA11.13964479

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIS E. HARTMAN, II

Mailing Address 240 N ROCK RD
STE. 104

City State Zip Code
WICHITA KS 67206-2244

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INK CONSTRUCTION OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
MM / DD / YYYY
11 / 03 / 2010

Transaction ID: SA11.13966023

Amount of Each Receipt this Period
10000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 10160.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 926 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. WILLIAM T. HARTMAN

Mailing Address P.O. BOX 1034

City State Zip Code
WESTTOWN PA 19395-1034

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 381.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948571

Amount of Each Receipt this Period

61.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

VINCENT HARTNETT

Mailing Address 2435 ORCHARD CREST BLVD.

City State Zip Code
MANASQUAN NJ 08736-4009

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 201.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944633

Amount of Each Receipt this Period

101.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

JAMES HARTUNG

Mailing Address 2148 HILLEBRAND DRIVE

City State Zip Code
CROSS PLAINS WI 53528-9120

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HARTUNG BROTHERS, INC. FARMER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13932407

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

662.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 927 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. RAY HARTWELL
Mailing Address 1610 AERIE LN

City State Zip Code
MC LEAN VA 22101-4657

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HUNTON AND WILLIAMS OWNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955910

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. ELEANOR L. HARVEY
Mailing Address 1000 N PECAN DR.

City State Zip Code
HOBBS NM 88240-5339

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941846

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. SUSAN T. HARVEY
Mailing Address 1514 E. LEVEL STREET

City State Zip Code
COVINA CA 91724-3566

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13964162

Amount of Each Receipt this Period
60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

360.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 928 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DAVID H. HARWOOD
Mailing Address 2126 N 128TH ST
City SEATTLE State WA Zip Code 98133-7848
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13934535
Amount of Each Receipt this Period 120.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAVID H. HARWOOD
Mailing Address 2126 N 128TH ST
City SEATTLE State WA Zip Code 98133-7848
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 10 / 20 / 2010
Transaction ID: SA11.13944109
Amount of Each Receipt this Period 180.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL S. HARWOOD
Mailing Address 5105 RAIN TREE CIRCLE
City CULVER CITY State CA Zip Code 90230-4433
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 525.00
Date of Receipt 10 / 28 / 2010
Transaction ID: SA11.13957963
Amount of Each Receipt this Period 250.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 550.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 929 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. CRISTEN HASLAM

Mailing Address PO BOX 10146

City State Zip Code
KNOXVILLE TN 37939-0146

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
10 / 27 / 2010

Transaction ID: SA11.13959338

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAMES A. HASLAM, II

Mailing Address PO BOX 10146

City State Zip Code
KNOXVILLE TN 37939-0146

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PILOT CORPORATION CHAIRMAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
10 / 27 / 2010

Transaction ID: SA11.13959338

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. NATALIE HASLAM

Mailing Address PO BOX 10146

City State Zip Code
KNOXVILLE TN 37939-0146

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
10 / 27 / 2010

Transaction ID: SA11.13959349

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 12500.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 930 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM E. HASLAM

Mailing Address PO BOX 10146

City State Zip Code
KNOXVILLE TN 37939-0146

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CITY OF KNOXVILLE MAYOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
10 / 27 / 2010

Transaction ID: SA11.13959334

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
YNGVAR HASLESTAD

Mailing Address 1400 OLD JORDAN RD APT 2268
APT 2268

City State Zip Code
SOUTHAMPTON PA 18966-4819

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 410.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13937331

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
YNGVAR HASLESTAD

Mailing Address 1400 OLD JORDAN RD APT 2268
APT 2268

City State Zip Code
SOUTHAMPTON PA 18966-4819

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 410.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13948286

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 5065.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 931 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
YNGVAR HASLESTAD

Mailing Address 1400 OLD JORDAN RD APT 2268
APT 2268

City SOUTHAMPTON State PA Zip Code 18966-4819

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 410.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950472

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
LAWRENCE HASS

Mailing Address 40 E 80TH. ST. APT. 17A

City NEW YORK State NY Zip Code 10075-0590

FEC ID number of contributing federal political committee. **C**

Name of Employer PAUL HASTINGS Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 501.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933262

Amount of Each Receipt this Period
251.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
COL. FREDRICK J. HASSE, USN (RET.)

Mailing Address 1821 E DAYTON RD

City CARO State MI Zip Code 48723-9478

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953446

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **476.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 932 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MARY-ANN HASTINGS
Mailing Address 426 MONTREAL WAY
City State Zip Code
ROCKLEDGE FL 32955-5930
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
RETIRED RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13946538
Amount of Each Receipt this Period: 120.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. MAXINE L. HATFIELD
Mailing Address 16661 HIGHWAY 190
City State Zip Code
PINEVILLE KY 40977-8488
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
RETIRED RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00
Date of Receipt: 11 / 15 / 2010
Transaction ID: SA11.13968957
Amount of Each Receipt this Period: 30.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. BETTE HATHCOAT
Mailing Address 5346 ALAN AVE.
City State Zip Code
SAN JOSE CA 95124-5748
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00
Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13945314
Amount of Each Receipt this Period: 110.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 260.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 933 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ARTHUR A. HATHWAY

Mailing Address 296 ATWOODVILLE RD.

City State Zip Code
MANSFIELD CENTER CT 06250-1106

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 381.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932751

Amount of Each Receipt this Period

101.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DR. CHRISTOPHER A. HAUER

Mailing Address 9069 REGENCY WOODS DR

City State Zip Code
KIRTLAND OH 44094-9380

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BAYLESS PATH MARK PHYSICIAN

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 364.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945577

Amount of Each Receipt this Period

39.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. CLAYTON N. HAUGSE

Mailing Address 2224 MYRTLE DRIVE

City State Zip Code
BILLINGS MT 59102-6261

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940225

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

190.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 934 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
ROGER HAUSEN

Mailing Address 1227 BULL CREEK RD

City State Zip Code
GRANTS PASS OR 97527-9503

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 255.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956705

Amount of Each Receipt this Period
850.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. JACQUELINE A. HAVEL

Mailing Address 9200 CHERRY CREEK SOUTH DR APT

City State Zip Code
DENVER CO 80231

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 255.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959237

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. LEO J. HAVILAN

Mailing Address 6 LAKE HELIX DR.

City State Zip Code
LA MESA CA 91941-4434

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 700.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13947126

Amount of Each Receipt this Period
700.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

850.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	PAGE 935 / 3187
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. SHIRLEY A. HAVLEK	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 5615 SOUTHLINGTON DR.	Transaction ID: SA11.13950311
	City State Zip Code CLEVELAND OH 44129-5227	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 261.00	

B.	Full Name (Last, First, Middle Initial) MRS. SHIRLEY A. HAVLEK	Date of Receipt MM / DD / YYYY 11 / 15 / 2010
	Mailing Address 5615 SOUTHLINGTON DR.	Transaction ID: SA11.13968819
	City State Zip Code CLEVELAND OH 44129-5227	Amount of Each Receipt this Period 1.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 261.00	

C.	Full Name (Last, First, Middle Initial) MR. JAMES W. HAWKINS, III	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 2604 N. NELSON STREET	Transaction ID: SA11.13951144
	City State Zip Code ARLINGTON VA 22207-5032	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	2551.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 936 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. MAGALENE L. HAWKINS

Mailing Address 229 BENDELOW COURT

City State Zip Code
DELAWARE OH 43015-1378

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 555.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928520

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. MAGALENE L. HAWKINS

Mailing Address 229 BENDELOW COURT

City State Zip Code
DELAWARE OH 43015-1378

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 555.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13969814

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ROBERT C. HAWKINS

Mailing Address 470 SAVOIE DRIVE

City State Zip Code
PALM BEACH GARDENS FL 33410-1606

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943923

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

200.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 937 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT C. HAWKINS

Mailing Address 470 SAVOIE DRIVE

City State Zip Code
PALM BEACH GARDENS FL 33410-1606

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944378

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT L. HAWKINS, JR.

Mailing Address 4208B WILLOWLAKE CT.

City State Zip Code
JEFFERSON CTY MO 65109-4532

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938604

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. CAROL J. HAYES

Mailing Address 1904 COUNTY RD 124

City State Zip Code
CHESAPEAKE OH 45619-7847

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940205

Amount of Each Receipt this Period
110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **210.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 938 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) GARY HAYES		Date of Receipt
	Mailing Address 20480 RANGER LANE RD.		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	FREEPORT	OH	43973-8906
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer WAMPOM HARDWARE		Occupation COMPLAINT OFFIVER	Transaction ID: SA11.13937910
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="320.00"/>	<input type="text" value="20.00"/>
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) GARY HAYES		Date of Receipt
	Mailing Address 20480 RANGER LANE RD.		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	FREEPORT	OH	43973-8906
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer WAMPOM HARDWARE		Occupation COMPLAINT OFFIVER	Transaction ID: SA11.13956461
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="320.00"/>	<input type="text" value="40.00"/>
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) L J. HAYES		Date of Receipt
	Mailing Address 508 HIDDEN RIDGE CT.		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	ENCINITAS	CA	92024-5838
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13964738
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="201.00"/>	<input type="text" value="101.00"/>
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="161.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 939 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ROBERT E. HAYES

Mailing Address 16925 HIERBA DR
APT 437

City State Zip Code
SAN DIEGO CA 92128-2666

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
301.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948662

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DR. THOMAS HAYES

Mailing Address 5 COMSTOCK PLACE

City State Zip Code
CHARLESTON WV 25314-1207

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13943036

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. EVELYN C. HAYNES

Mailing Address 1110 ARCADIA DR

City State Zip Code
HARLINGEN TX 78550-9004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
760.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954743

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

300.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 940 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
GUY HAYNES

Mailing Address 26 BASSY ST

City State Zip Code
LEBANON NH 03766-1435

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944601

Amount of Each Receipt this Period
75.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. TWILLA HAYNES

Mailing Address 160 DEER CREEK TRL

City State Zip Code
HOSCHTON GA 30548-2118

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PRIVATE SCHOOL/GA STATE FACULTY/CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951642

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. DEBBIE HAYNIE

Mailing Address PO BOX Q

City State Zip Code
PRAGUE OK 74864-1080

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959053

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **275.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 941 / 3187
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. J. RICHARD HAYS

Mailing Address 2337 MASONIC DR

City State Zip Code
SEWICKLEY PA 15143-2418

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934643

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHN HAYS

Mailing Address 531 COUNTY RD. 611

City State Zip Code
BROWNWOOD TX 76801-0802

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953955

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. N. W. HAYS

Mailing Address 7539 COUNTY RD. 372D

City State Zip Code
HENDERSON TX 75654-9632

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934590

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **390.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 942 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ANDREW U. HAZI

Mailing Address P.O. BOX 6161

City State Zip Code
SANTA MARIA CA 93456-6161

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LLNS LLC SCIENTIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935503

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. RALPH L. HAZZARD

Mailing Address N54W35800 HILL RD.

City State Zip Code
OCONOMOWOC WI 53066-3263

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932577

Amount of Each Receipt this Period
1.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. RALPH L. HAZZARD

Mailing Address N54W35800 HILL RD.

City State Zip Code
OCONOMOWOC WI 53066-3263

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933403

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **126.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 943 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JIMMY HEAD

Mailing Address **28515 S HIGHWAY 97**

City **HARRISON** State **ID** Zip Code **83833-7741**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **10 / 19 / 2010**

Transaction ID: SA11.13931714

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHN F. HEAD

Mailing Address **1330 JOSEPHINE ST. APT. 1**

City **DENVER** State **CO** Zip Code **80206-2264**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt **10 / 25 / 2010**

Transaction ID: SA11.13951910

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOHN F. HEAD

Mailing Address **1330 JOSEPHINE ST. APT. 1**

City **DENVER** State **CO** Zip Code **80206-2264**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt **10 / 27 / 2010**

Transaction ID: SA11.13958951

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **300.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 944 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. STEPHEN HEADY

Mailing Address 2918 W 92ND PL

City State Zip Code
SHAWNEE MSN KS 66206-1804

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 212.50

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929531

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. JACQUELINE S. HEARD

Mailing Address 3904 HALLOAK COURT

City State Zip Code
VALRICO FL 33596-6499

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928498

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. JACQUELINE S. HEARD

Mailing Address 3904 HALLOAK COURT

City State Zip Code
VALRICO FL 33596-6499

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938474

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 115.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 945 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. JACQUELINE S. HEARD

Mailing Address 3904 HALLOAK COURT

City State Zip Code
VALRICO FL 33596-6499

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 315.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 0 / 2 0 1 0

Transaction ID: SA11.13971538

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. PAULINE G. HEARNE

Mailing Address 955 KINZER ST.

City State Zip Code
POPLAR BLUFF MO 63901-4911

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944134

Amount of Each Receipt this Period

1.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. PAULINE G. HEARNE

Mailing Address 955 KINZER ST.

City State Zip Code
POPLAR BLUFF MO 63901-4911

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13962342

Amount of Each Receipt this Period

35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

61.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 946 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DEBORAH HEARST

Mailing Address P.O. BOX 1516

City SOUTHAMPTON State NY Zip Code 11969-1516

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13951926
Amount of Each Receipt this Period: 250.00
CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. ZELLA HEASLEY

Mailing Address 7575 STATE ROUTE 30

City NORTH HUNTINGDON State PA Zip Code 15642-7519

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER
Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 27 / 2010
Transaction ID: SA11.13958743
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
W DEAN HEATH

Mailing Address 2619 LUKAS CT. SE

City ALBANY State OR Zip Code 97322-5571

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13953640
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **325.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 947 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. CHRISTIE HEAVENER

Mailing Address 3300 UNIVERSITY BOULEVARD, #218

City State Zip Code
WINTER PARK FL 32792-7435

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 25000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13951122

Amount of Each Receipt this Period

25000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JAMES W. HEAVENER

Mailing Address 3300 UNIVERSITY BOULEVARD, #218

City State Zip Code
WINTER PARK FL 32792-7435

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
THE HEAVENER COMPANY REAL ESTATE DEVELOPMENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 25000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13951110

Amount of Each Receipt this Period

25000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
SUSAN HECK

Mailing Address 18917 PECKHAM DR

City State Zip Code
POINT VENTURE TX 78645-8556

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
W. W. GRAINGER, INC SALES MANAGER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 310.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13964413

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

50050.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 948 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
FREDERICK M. HECKLER

Mailing Address 5225 SUPERIOR AVE APT. 600

City State Zip Code
CLEVELAND OH 44103-1361

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 380.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941543

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. CLEMENS V. HEDEEN, JR.

Mailing Address 218 N 14TH AVE

City State Zip Code
STURGEON BAY WI 54235-1318

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HEDEEN INTERNATIONAL BUSINESS OWNER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 700.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928488

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. SUE HEDRICK

Mailing Address P.O. BOX 712

City State Zip Code
STATESVILLE NC 28687-0712

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13965369

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 949 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES E. HEERIN

Mailing Address 765 LULLWATER ROAD NE

City ATLANTA State GA Zip Code 30307-1288

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13935619
Amount of Each Receipt this Period: 250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. PEGGY HEETER

Mailing Address 513 CHARLESTON RD

City SPENCER State WV Zip Code 25276-9231

FEC ID number of contributing federal political committee. **C**

Name of Employer HEETER CONSTRUCTION INC.
Occupation TREASURER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13953395
Amount of Each Receipt this Period: 250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BARBARA HEFFLEBOWER

Mailing Address 850 66TH. AVE

City VERO BEACH State FL Zip Code 32966-1125

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 351.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13935927
Amount of Each Receipt this Period: 1.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 501.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 950 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. EDWARD D. HEFFNER

Mailing Address 1 STAR FARM ROAD

City State Zip Code
PURCHASE NY 10577-2627

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EMPIRE CITY IRON WORKS EXECUTIVE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951609

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. MARY F. HEFFNER

Mailing Address P.O. BOX 737

City State Zip Code
POULSBO WA 98370-0737

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 730.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938517

Amount of Each Receipt this Period

160.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
SHARON HEFLIN

Mailing Address 27 CHIMNEY VIEW LANE

City State Zip Code
SPRINGFIELD IL 62707-9306

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UNIVERSITY OF ILLINOIS AT SPRINGFIELD SECRETARY

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 410.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 1 0

Transaction ID: SA11.13966856

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

460.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 951 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. KATHY HEGG

Mailing Address 162 CAMELOT DR

City HUNTINGTON State WV Zip Code 25701-5305

FEC ID number of contributing federal political committee. **C**

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 11 / 01 / 2010
Transaction ID: SA11.13961212
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ELIZABETH GREENE HEILMAN

Mailing Address 5213 PINE CONE LANE

City DURHAM State NC Zip Code 27705-8703

FEC ID number of contributing federal political committee. **C**

Name of Employer: SELF-EMPLOYED Occupation: RETAIL NETWORKING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 403.00

Date of Receipt: 10 / 28 / 2010
Transaction ID: SA11.13957632
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ELIZABETH GREENE HEILMAN

Mailing Address 5213 PINE CONE LANE

City DURHAM State NC Zip Code 27705-8703

FEC ID number of contributing federal political committee. **C**

Name of Employer: SELF-EMPLOYED Occupation: RETAIL NETWORKING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 403.00

Date of Receipt: 11 / 09 / 2010
Transaction ID: SA11.13966527
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 150.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 952 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
ELIZABETH GREENE HEILMAN

Mailing Address 5213 PINE CONE LANE

City State Zip Code
DURHAM NC 27705-8703

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED RETAIL NETWORKING

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 403.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 5 / 2 0 1 0

Transaction ID: SA11.13968504

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ROGER K. HEIM

Mailing Address 4444 N KNOXVILLE AVE

City State Zip Code
PEORIA IL 61614-6080

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED REAL ESTATE

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934857

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. HILTON E. HEINEKE

Mailing Address 1121 N FOX RIDGE LINKS DR.

City State Zip Code
VINCENNES IN 47591-6895

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 310.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945447

Amount of Each Receipt this Period

90.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

215.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 953 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CHARLES F. HEINIG

Mailing Address P.O. BOX 91

City State Zip Code
WARE NECK VA 23178-0091

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2010

Transaction ID: SA11.13965689

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CLIFFORD STANTON HEINZ

Mailing Address 3 SAN JOAQUIN PLAZA
SUITE 170

City State Zip Code
NEWPORT BEACH CA 92660-5945

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 8000.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2010

Transaction ID: SA11.13932334

Amount of Each Receipt this Period
3000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOHN M. HEINZE

Mailing Address PO BOX 415

City State Zip Code
COOPERSTOWN ND 58425-0415

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED TRUCK DRIVER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13934801

Amount of Each Receipt this Period
30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **3230.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 954 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) JOHN M. HEINZE	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address PO BOX 415	Transaction ID: SA11.13946907
	City State Zip Code COOPERSTOWN ND 58425-0415	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer SELF-EMPLOYED Occupation TRUCK DRIVER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00	

B.	Full Name (Last, First, Middle Initial) JOHN M. HEINZE	Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address PO BOX 415	Transaction ID: SA11.13961029
	City State Zip Code COOPERSTOWN ND 58425-0415	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer SELF-EMPLOYED Occupation TRUCK DRIVER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00	

C.	Full Name (Last, First, Middle Initial) MR. MIRIAM HEISEY	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address P.O. BOX 5093	Transaction ID: SA11.13952103
	City State Zip Code LANCASTER PA 17606-5093	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional)	▶	295.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 955 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MICHAEL HEISLEY

Mailing Address 70 W MADISON ST STE 5600

City State Zip Code
CHICAGO IL 60602-4211

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
HEICO COMPANIES LLC CHAIRMAN EMERITIS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13963680

Amount of Each Receipt this Period 500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WALLACE O. HEISTAD

Mailing Address 137 HEMSTEAD ST.

City State Zip Code
LAKE BLUFF IL 60044-1157

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13941078

Amount of Each Receipt this Period 75.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. NANCY JOY HEITMANN

Mailing Address 1480 HAPPY VALLEY RD.

City State Zip Code
CROWN POINT IN 46307-9300

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 291.00

Date of Receipt MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13934330

Amount of Each Receipt this Period 20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 595.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 956 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. NANCY JOY HEITMANN

Mailing Address 1480 HAPPY VALLEY RD.

City State Zip Code
CROWN POINT IN 46307-9300

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 291.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952012

Amount of Each Receipt this Period
20.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JIMMIE J. HEITZ

Mailing Address 3808 FLEETWOOD DR

City State Zip Code
AMARILLO TX 79109-5648

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961501

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ROBERT J. HEITZMAN

Mailing Address 5202 TREASURE VIEW WAY

City State Zip Code
LEESBURG FL 34748-9227

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 202.95

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929586

Amount of Each Receipt this Period
30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 150.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 957 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MARK HELBRAUN

Mailing Address 20 PROSPECT AVE

City State Zip Code
HACKENSACK NJ 07601-1997

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SURGEON

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13958231

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. PAUL HELD

Mailing Address 3605 EAST AVENUE

City State Zip Code
ROCHESTER NY 14618-3519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ALLSTATE TOOL & DIE INC. OWNER PRESIDENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 501.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934621

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. PAUL HELD

Mailing Address 3605 EAST AVENUE

City State Zip Code
ROCHESTER NY 14618-3519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ALLSTATE TOOL & DIE INC. OWNER PRESIDENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 501.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935963

Amount of Each Receipt this Period

1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

501.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 958 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. REGINA B. HELDRICH

Mailing Address 239 HARRISON AVENUE

City State Zip Code
HIGHLAND PARK NJ 08904-1815

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930826

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. IRWIN HELFORD

Mailing Address 127 SPINDRIFT DR
SUITE 1804

City State Zip Code
RANCHO PALOS VERDE CA 90275-6048

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940594

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DANIEL HELLER

Mailing Address 2127 PACKARD AVE

City State Zip Code
HUNTINGDON VALLEY PA 19006-6414

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1050.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13931469

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1200.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 959 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. SAMUEL B. HELLIER	Date of Receipt MM / DD / YYYY 11 / 02 / 2010
	Mailing Address 6635 HAZEL LN	Transaction ID: SA11.13962664
	City State Zip Code MC LEAN VA 22101-5114	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 410.00	

B.	Full Name (Last, First, Middle Initial) MR. RALPH HELLMANN	Date of Receipt MM / DD / YYYY 10 / 29 / 2010
	Mailing Address 1101 K STREET SUITE 610	Transaction ID: SA11.13959403
	City State Zip Code WASHINGTON DC 20005-7031	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INDUSTRY TECHNOLOGY IN-DUSTRY COUNCI	Occupation SENIOR VICE PRESIDENT, GOVERNMENT RELA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2250.00	

C.	Full Name (Last, First, Middle Initial) MR. WALLACE H. HELM	Date of Receipt MM / DD / YYYY 11 / 22 / 2010
	Mailing Address 6219 ANGELL PL	Transaction ID: SA11.13972822
	City State Zip Code SAN DIEGO CA 92122-2108	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 296.00	

SUBTOTAL of Receipts This Page (optional)	450.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 960 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DR. GARY D. HELMBRECHT, M.D.

Mailing Address 430 FOXDALE LN

City State Zip Code
CHARLOTTESVILLE VA 22903-9200

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PRENATAL DI DOCTOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928931

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
CECIL CLYDE HELTON

Mailing Address 737 STANDARD AVE.

City State Zip Code
CORBIN KY 40701-6566

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13960082

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. ELENA M. HEMMINGER

Mailing Address 49 CEDAR SHORE DRIVE

City State Zip Code
MASSAPEQUA NY 11758-7318

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 351.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933370

Amount of Each Receipt this Period
251.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

551.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 961 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. CARROLL HEMPHILL

Mailing Address 955 CADARETTA RD

City State Zip Code
GORE SPRINGS MS 38929-6641

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED FARMER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 650.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948578

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
OLGA M. HENDERSON

Mailing Address 402 CUMBERLAND DR.

City State Zip Code
SMYRNA TN 37167-2712

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 2880.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13928633

Amount of Each Receipt this Period

75.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
OLGA M. HENDERSON

Mailing Address 402 CUMBERLAND DR.

City State Zip Code
SMYRNA TN 37167-2712

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 2880.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930634

Amount of Each Receipt this Period

80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

355.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 962 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
OLGA M. HENDERSON

Mailing Address 402 CUMBERLAND DR.

City State Zip Code
SMYRNA TN 37167-2712

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2880.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934845

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
OLGA M. HENDERSON

Mailing Address 402 CUMBERLAND DR.

City State Zip Code
SMYRNA TN 37167-2712

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2880.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940877

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
OLGA M. HENDERSON

Mailing Address 402 CUMBERLAND DR.

City State Zip Code
SMYRNA TN 37167-2712

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2880.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944113

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 963 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
OLGA M. HENDERSON

Mailing Address 402 CUMBERLAND DR.

City State Zip Code
SMYRNA TN 37167-2712

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2880.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	1	0

Transaction ID: SA11.13949049

Amount of Each Receipt this Period
80.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
OLGA M. HENDERSON

Mailing Address 402 CUMBERLAND DR.

City State Zip Code
SMYRNA TN 37167-2712

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2880.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13952264

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
OLGA M. HENDERSON

Mailing Address 402 CUMBERLAND DR.

City State Zip Code
SMYRNA TN 37167-2712

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2880.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	6	/	2	0	1	0

Transaction ID: SA11.13969201

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **280.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 964 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. ROBERTA HENDERSON

Mailing Address 4316 GLENVIEW AVE.

City State Zip Code
GLENVIEW KY 40025-7509

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	1	0

Transaction ID: SA11.13931581

Amount of Each Receipt this Period
150.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SALLY HENDERSON

Mailing Address 3021 W FIELDSTREAM DR.

City State Zip Code
MERIDIAN ID 83646-4129

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	1	0

Transaction ID: SA11.13948520

Amount of Each Receipt this Period
101.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. MARYANN A. HENDRICKSON

Mailing Address 8340 HWY 12

City State Zip Code
ORANGE TX 77632-7302

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	1	0

Transaction ID: SA11.13960734

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **351.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 965 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. MARION M. HENDRICKSON

Mailing Address 3300 KIRKWALL ST

City State Zip Code
EL PASO TX 79925-4117

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 205.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953170

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. FRANK X. HENKE, IV

Mailing Address 2300 RIVERSIDE DRIVE
UNIT 5E

City State Zip Code
TULSA OK 74114-2403

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AMERICAN BANK BANKER/ATTORNEY

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13948207

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. MARILYN M. HENLEY

Mailing Address 5030 CEDAR SPRING DR

City State Zip Code
MISSOURI CITY TX 77459-4172

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1050.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13955981

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 966 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. EMMALINE HENN

Mailing Address 6 MEADOW CT.

City State Zip Code
HUNTINGTON IN 46750-4406

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UNEMPLOYED UNEMPLOYED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 971.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934462

Amount of Each Receipt this Period

21.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. EDWARD L. HENNESSY, JR.

Mailing Address 577 VAN BEUREN ROAD

City State Zip Code
MORRISTOWN NJ 07960-6463

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13947106

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JOHN HENNESSEY

Mailing Address 2254 FARGO BLVD.

City State Zip Code
GENEVA IL 60134-4304

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 470.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918463

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

321.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 967 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. VINGENT HENNESSY

Mailing Address 5914 SHERBORN LANE

City State Zip Code
SPRINGFIELD VA 22152-1035

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 262.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935198

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. EDWARD TIMOTHY HENNIG

Mailing Address N31W23856 OLD FARM CT

City State Zip Code
PEWAUKEE WI 53072-4090

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FAF ADVISORS RELATIONSHIP MANAGER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928977

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. BONNIE L. HENRY

Mailing Address 2285 LAS LUNAS ST

City State Zip Code
PASADENA CA 91107-2423

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1621.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933051

Amount of Each Receipt this Period

241.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

341.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 968 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. JULIA D. HENRY	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 3308 CHEVAL CIR.	Transaction ID: SA11.13931559
	City State Zip Code VESTAVIA AL 35216-2045	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS		
Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 810.00		

B.	Full Name (Last, First, Middle Initial) MRS. PAULA R. HENRY	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 7683 DOUGLAS HILL CT	Transaction ID: SA11.13938131
	City State Zip Code BROWNSBURG IN 46112-7860	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer Occupation MC COMB WINDOW & DOOR ACCOUNTANT		
Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 210.00		

C.	Full Name (Last, First, Middle Initial) MRS. PAULA R. HENRY	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 7683 DOUGLAS HILL CT	Transaction ID: SA11.13960547
	City State Zip Code BROWNSBURG IN 46112-7860	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer Occupation MC COMB WINDOW & DOOR ACCOUNTANT		
Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 210.00		

SUBTOTAL of Receipts This Page (optional)	400.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 969 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DR. ALBERT E. HENSEL, JR.

Mailing Address 6408 AUDUBON OAKS

City State Zip Code
ALEXANDRIA LA 71301-2799

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937314

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. EDGAR S. HENSEL

Mailing Address 1443 DEWBERRY TRAIL

City State Zip Code
MARIETTA GA 30062-4014

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CITY OF ROSWELL LANDSCAPE SPECIALIST

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 227.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962566

Amount of Each Receipt this Period

35.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
ERNEST E. HENSHAW

Mailing Address 226 BRANDYWINE CIR

City State Zip Code
ENGLEWOOD FL 34223-1955

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943686

Amount of Each Receipt this Period

80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 970 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
STEVEN L. HENSLEE

Mailing Address 2012 10TH AVE

City State Zip Code
COLUMBUS GA 31901-1460

FEC ID number of contributing federal political committee. **C**

Name of Employer
HUBBARD HENSLEE CENTER FOR EYE SRGRY

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928939

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
STEVEN L. HENSLEE

Mailing Address 2012 10TH AVE

City State Zip Code
COLUMBUS GA 31901-1460

FEC ID number of contributing federal political committee. **C**

Name of Employer
HUBBARD HENSLEE CENTER FOR EYE SRGRY

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13968517

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
C R. HENTHORN

Mailing Address 107 WALLACE AVE

City State Zip Code
CRAWFORDSVLLE IN 47933-2531

FEC ID number of contributing federal political committee. **C**

Name of Employer
SELF-EMPLOYED

Occupation
ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936585

Amount of Each Receipt this Period

1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

301.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 971 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. LEROY B. HERBST, JR.
 Mailing Address 18755 W. BERNARDO DRIVE
APARTMENT 1212
 City SAN DIEGO State CA Zip Code 92127-3024
 Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13950506
 Amount of Each Receipt this Period 75.00
CONTRIBUTION
 FEC ID number of contributing federal political committee. C
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 325.00

B. Full Name (Last, First, Middle Initial)
MR. JACK RAYMOND HERETH
 Mailing Address 2269 E CHEROKEE DR.
 City WOODSTOCK State GA Zip Code 30188-1941
 Date of Receipt 10 / 15 / 2010
Transaction ID: SA11.13928517
 Amount of Each Receipt this Period 50.00
CONTRIBUTION
 FEC ID number of contributing federal political committee. C
 Name of Employer GIBSONBURG HEALTH LLC Occupation EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 550.00

C. Full Name (Last, First, Middle Initial)
MR. JACK RAYMOND HERETH
 Mailing Address 2269 E CHEROKEE DR.
 City WOODSTOCK State GA Zip Code 30188-1941
 Date of Receipt 11 / 18 / 2010
Transaction ID: SA11.13969813
 Amount of Each Receipt this Period 50.00
CONTRIBUTION
 FEC ID number of contributing federal political committee. C
 Name of Employer GIBSONBURG HEALTH LLC Occupation EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 550.00

SUBTOTAL of Receipts This Page (optional) ► 175.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 972 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. ANN W. HERLONG

Mailing Address 19 TWO MILE DR

City JOHNSTON State SC Zip Code 29832-2527

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13944891
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DANIEL S. HERMANN

Mailing Address 615 WINTERWOOD DRIVE

City EVANSVILLE State IN Zip Code 47715-4280

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13945622
Amount of Each Receipt this Period: 10000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. WILLIAM J. HERMANN, JR.

Mailing Address 103 RIVER RIDGE RD

City SEALY State TX Zip Code 77474-8525

FEC ID number of contributing federal political committee. **C**

Name of Employer ALBERTO ROCA & ASSOC Occupation DOCTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13931490
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 10075.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 973 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ANTHONY HERNANDEZ

Mailing Address 903 N MARINE AVENUE

City State Zip Code
WILMINGTON CA 90744-4414

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
490.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949155

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. MILAGROS C. HERNANDEZ

Mailing Address 2315 GROESBECK AVE

City State Zip Code
LANSING MI 48912-3452

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
301.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13931200

Amount of Each Receipt this Period

31.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. MILAGROS C. HERNANDEZ

Mailing Address 2315 GROESBECK AVE

City State Zip Code
LANSING MI 48912-3452

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
301.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935728

Amount of Each Receipt this Period

20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

151.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 974 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. JUNE HERNESMAA

Mailing Address 12581 S.E. RIVER ROAD
APARTMENT 344

City State Zip Code
MILWAUKIE OR 97222-8009

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
207.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957302

Amount of Each Receipt this Period

15.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. MARTHA HEROY

Mailing Address 21 MICHAEL ST

City State Zip Code
LEBANON NH 03766-1094

FEC ID number of contributing federal political committee. **C**

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951308

Amount of Each Receipt this Period

80.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. ARNETTA W. HERRINGTON

Mailing Address 4614 PINEDALE DR

City State Zip Code
DURHAM NC 27705-2324

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948996

Amount of Each Receipt this Period

35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 975 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MS. ARNETTA W. HERRINGTON</p> <p>Mailing Address 4614 PINEDALE DR</p> <hr/> <p>City State Zip Code DURHAM NC 27705-2324</p> <hr/> <p>FEC ID number of contributing federal political committee. C</p> <hr/> <p>Name of Employer Occupation RETIRED RETIRED</p> <hr/> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 210.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0</p> <p>Transaction ID: SA11.13949031</p> <hr/> <p>Amount of Each Receipt this Period 25.00</p> <p>CONTRIBUTION</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) MS. ARNETTA W. HERRINGTON</p> <p>Mailing Address 4614 PINEDALE DR</p> <hr/> <p>City State Zip Code DURHAM NC 27705-2324</p> <hr/> <p>FEC ID number of contributing federal political committee. C</p> <hr/> <p>Name of Employer Occupation RETIRED RETIRED</p> <hr/> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 210.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 1 0</p> <p>Transaction ID: SA11.13965762</p> <hr/> <p>Amount of Each Receipt this Period 25.00</p> <p>CONTRIBUTION</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) MS. ARNETTA W. HERRINGTON</p> <p>Mailing Address 4614 PINEDALE DR</p> <hr/> <p>City State Zip Code DURHAM NC 27705-2324</p> <hr/> <p>FEC ID number of contributing federal political committee. C</p> <hr/> <p>Name of Employer Occupation RETIRED RETIRED</p> <hr/> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 210.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 2 / 2 0 1 0</p> <p>Transaction ID: SA11.13972911</p> <hr/> <p>Amount of Each Receipt this Period 35.00</p> <p>CONTRIBUTION</p>
--	---

SUBTOTAL of Receipts This Page (optional)	85.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 976 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JAMES R. HERRIMAN

Mailing Address 140 N. AMERICAN STREET

City State Zip Code
RIDGECREST CA 93555-3932

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
D.C.S. CORPORATION ENGINEER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 390.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931599

Amount of Each Receipt this Period

35.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
JOANNE HERRING

Mailing Address 2121 KIRBY DRIVE, #144

City State Zip Code
HOUSTON TX 77019-6069

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938489

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. MARCIA HERSCHMANN

Mailing Address 4430 PINE TREE DR.

City State Zip Code
MIAMI BEACH FL 33140-3132

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 301.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943517

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1135.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 977 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. RICH HERWECK

Mailing Address 12524 TRIPLE CREEK DRIVE

City State Zip Code
DRIPPING SPRINGS TX 78620-3742

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ROBUST ENERGY ENERGY EXECUTIVE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961235

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. GEORGE D. HESS

Mailing Address 509 HEARTHSTONE DR.

City State Zip Code
WINDSOR CT 06095-1640

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WESTINGHOUSE ELECTRIC CO ENGINEER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 480.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959703

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. K. WILLIAM HESS

Mailing Address 4844 MARATHON WAY

City State Zip Code
OCEANSIDE CA 92056-7407

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2625.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934103

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 978 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. K. WILLIAM HESS

Mailing Address 4844 MARATHON WAY

City State Zip Code
OCEANSIDE CA 92056-7407

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2625.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940235

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAY HESSELGRAVE

Mailing Address 8 ORCHARD ROAD

City State Zip Code
KINNELON NJ 07405-2730

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED FINANCIAL PLANNER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13947612

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. MARIE C. HESSE

Mailing Address 3326 HIGHLANDS BRIDGE ROAD

City State Zip Code
SARASOTA FL 34235-6859

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943376

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 3025.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 979 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
GEORGE CHRISTOPHER HESTERBERG

Mailing Address 9009 WOODEN BRIDGE RD.

City State Zip Code
POTOMAC MD 20854-2409

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949627

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
GEORGE CHRISTOPHER HESTERBERG

Mailing Address 9009 WOODEN BRIDGE RD.

City State Zip Code
POTOMAC MD 20854-2409

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 7 / 2 0 1 0

Transaction ID: SA11.13969862

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. HELEN HESTERFER

Mailing Address 27 DEVONSHIRE PL

City State Zip Code
PAWLEYS ISLAND SC 29585-6340

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949126

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

200.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 980 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOHN HESTER

Mailing Address 3882 GLEN MEADOW DR

City NORCROSS State GA Zip Code 30092-1912

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 28 / 2010
Transaction ID: SA11.13960013
 Amount of Each Receipt this Period: 100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. TROY JAMES HETHERWICK

Mailing Address P.O. BOX 632

City DURHAM State CA Zip Code 95938-0632

FEC ID number of contributing federal political committee. **C**

Name of Employer ENLVE MEDICAL CENTER
Occupation LABORATORY SCIENTIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13948180
 Amount of Each Receipt this Period: 25.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. KENNETH E. HEUGEL

Mailing Address 713 COBBLESTONE DR

City EVANSVILLE State IN Zip Code 47715-4286

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13931771
 Amount of Each Receipt this Period: 100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 225.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 981 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
L. KENNETH HEULER

Mailing Address 19191 HARVARD AVE. #118E

City IRVINE State CA Zip Code 92612-4658

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2010
Transaction ID: SA11.13952939
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MARJORIE HEUSLER

Mailing Address 6 JELLICLE LN.

City WATERLOO State NY Zip Code 13165-9617

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 221.00

Date of Receipt 10 / 28 / 2010
Transaction ID: SA11.13960117
 Amount of Each Receipt this Period 26.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. LORETTA A. HEWITT

Mailing Address 757 FORT EBEBY RD

City COUPEVILLE State WA Zip Code 98239-9779

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13928890
 Amount of Each Receipt this Period 110.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 236.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 982 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. DON R. HEYDEN

Mailing Address 205 KING RICHARD ST.

City State Zip Code
IRVING TX 75061-6424

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13963170

Amount of Each Receipt this Period 20.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. DON R. HEYDEN

Mailing Address 205 KING RICHARD ST.

City State Zip Code
IRVING TX 75061-6424

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13963550

Amount of Each Receipt this Period 31.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ALAN HICKEY

Mailing Address 78 EBEN HILL RD

City State Zip Code
YARMOUTH ME 04096-5530

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13935534

Amount of Each Receipt this Period 50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 101.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 983 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. BILLIE HICKS		Date of Receipt
	Mailing Address 2010 VILLA DR.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 10 / 25 / 2010
	City	State	Zip Code
	TYLER	TX	75703-1929
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13953574
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Amount of Each Receipt this Period	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		CONTRIBUTION 31.00	
Occupation INFORMATION REQUESTED PER BEST EFFORTS		Aggregate Year-to-Date ▼	
		211.00	

B.	Full Name (Last, First, Middle Initial) MRS. BILLIE HICKS		Date of Receipt
	Mailing Address 2010 VILLA DR.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 10 / 25 / 2010
	City	State	Zip Code
	TYLER	TX	75703-1929
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13954483
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Amount of Each Receipt this Period	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		CONTRIBUTION 30.00	
Occupation INFORMATION REQUESTED PER BEST EFFORTS		Aggregate Year-to-Date ▼	
		211.00	

C.	Full Name (Last, First, Middle Initial) MRS. BILLIE HICKS		Date of Receipt
	Mailing Address 2010 VILLA DR.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 10 / 27 / 2010
	City	State	Zip Code
	TYLER	TX	75703-1929
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13958320
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Amount of Each Receipt this Period	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		CONTRIBUTION 30.00	
Occupation INFORMATION REQUESTED PER BEST EFFORTS		Aggregate Year-to-Date ▼	
		211.00	

SUBTOTAL of Receipts This Page (optional)	91.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 984 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MARK C. HICKS, JR.

Mailing Address 805 XANADU CT
APARTMENT 2

City JOHNSON CITY State TN Zip Code 37604

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13929004
Amount of Each Receipt this Period 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. STANLEY HIEB

Mailing Address 2235 10TH AVE SE

City ABERDEEN State SD Zip Code 57401-7390

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13949479
Amount of Each Receipt this Period 60.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. STANLEY HIEB

Mailing Address 2235 10TH AVE SE

City ABERDEEN State SD Zip Code 57401-7390

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 16 / 2010
Transaction ID: SA11.13969282
Amount of Each Receipt this Period 60.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 220.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 985 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DR. JAMES R. HIGGINS, M.D.		Date of Receipt
	Mailing Address 10920 S. 69TH E. AVENUE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 2 / 2 0 1 0
	City	State	Zip Code
	TULSA	OK	74133-7164
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13951120
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MR. KENNETH L. HIGHTOWER		Date of Receipt
	Mailing Address 3105 N 200TH AVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 1 8 / 2 0 1 0
	City	State	Zip Code
	ELKHORN	NE	68022-1885
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13934164
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 225.00
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MR. KENNETH L. HIGHTOWER		Date of Receipt
	Mailing Address 3105 N 200TH AVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 1 / 0 4 / 2 0 1 0
	City	State	Zip Code
	ELKHORN	NE	68022-1885
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13965952
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 225.00
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 540.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 986 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. LEONARD L. HIGLEY

Mailing Address 521 E WALNUT ST APT 2D

City State Zip Code
PERRY MO 63462-1054

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 205.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932487

Amount of Each Receipt this Period

35.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. RICHARD L. HILDBOLD

Mailing Address 7815 ROCK HILL LANE

City State Zip Code
CINCINNATI OH 45243-4046

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13932332

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. GAYLAND A. HILDEBRANDT

Mailing Address 211 S TALIESIN RD.

City State Zip Code
WALES WI 53183-9753

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED CARPENTER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 291.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933052

Amount of Each Receipt this Period

76.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1111.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 987 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) KIM A. HILDRED</p> <p>Mailing Address 6484 TAYACK PL</p> <p>City ALEXANDRIA State VA Zip Code 22312-2341</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer U.S. HOUSE OF REPRESENTATIVES Occupation SUBCOMMITTEE STAFF DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 1 0</p> <p>Transaction ID: SA11.13955656</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>CONTRIBUTION</p>
--	--

<p>B. Full Name (Last, First, Middle Initial) MR. WAYNE V. HILE</p> <p>Mailing Address P.O. BOX 257</p> <p>City HYGIENE State CO Zip Code 80533-0257</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer IBM Occupation PROJECT MANAGER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 333.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 1 0</p> <p>Transaction ID: SA11.13944690</p> <p>Amount of Each Receipt this Period 333.00</p> <p>CONTRIBUTION</p>
---	---

<p>C. Full Name (Last, First, Middle Initial) COL T. HILEMAN</p> <p>Mailing Address 1812 NIBLICK CIR</p> <p>City LAS VEGAS State NV Zip Code 89142-1836</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer RETIRED Occupation RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 2 / 2 0 1 0</p> <p>Transaction ID: SA11.13971777</p> <p>Amount of Each Receipt this Period 50.00</p> <p>CONTRIBUTION</p>
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SUBTOTAL of Receipts This Page (optional)	1383.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 988 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. ALICE W. HILL

Mailing Address 2 BRIDGEWORTH LN

City State Zip Code
SHERMAN CT 06784-1931

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 570.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956552

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BILL H. HILL

Mailing Address 2601 MARSH LN. UNIT 191
UNIT 191

City State Zip Code
PLANO TX 75093-8458

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940050

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. DON HILL

Mailing Address 1876 E SABIN DR
3

City State Zip Code
CASA GRANDE AZ 85122-6197

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TRI VALLEY CANCER RESEARCH AND TREATME INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951566

Amount of Each Receipt this Period
300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **600.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 989 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JAMES MAC HILL

Mailing Address 10440 SWIFT STREAM PL APT 212

City State Zip Code
COLUMBIA MD 21044-4570

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation ECOLOGIST/CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943443

Amount of Each Receipt this Period
35.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JOHN A. HILL

Mailing Address 402 MULBERRY ST

City State Zip Code
RAYVILLE LA 71269-3203

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 595.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951455

Amount of Each Receipt this Period
175.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JOYCE HILL

Mailing Address 1603 BROOKS AVE

City State Zip Code
BROWNWOOD TX 76801-7320

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951534

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **260.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 990 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. KEVIN D. HILL	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 1544 BELMEADE DR	Transaction ID: SA11.13931787
	City State Zip Code KINGSPORT TN 37664-2040	Amount of Each Receipt this Period 105.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

B.	Full Name (Last, First, Middle Initial) MR. ROBERT J. HILL	Date of Receipt MM / DD / YYYY 11 / 09 / 2010
	Mailing Address 2961 S LOOKOUT RDG	Transaction ID: SA11.13966538
	City State Zip Code APACHE JCT AZ 85118-1708	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer FOX FIRE PRINTING & PACKAGING, INC.	Occupation SYSTEMS ANALYST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) SHIRLEY J. HILL	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 708 SCARLET DR.	Transaction ID: SA11.13931966
	City State Zip Code PHARR TX 78577-6816	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional)	▶	145.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 991 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ERIC L. HILLER

Mailing Address 21 LAFAYETTE

City IRVINE State CA Zip Code 92620-2532

FEC ID number of contributing federal political committee. **C**

Name of Employer U.S. SECURITY ASSOC Occupation PART-TIME SECURITY GUARD

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13950448
 Amount of Each Receipt this Period: 20.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILLIAM L. HILLIS

Mailing Address 1103 SARATOGA DR

City FAIRBORN State OH Zip Code 45324-5742

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13952343
 Amount of Each Receipt this Period: 40.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WILLIAM L. HILLIS

Mailing Address 1103 SARATOGA DR

City FAIRBORN State OH Zip Code 45324-5742

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13957567
 Amount of Each Receipt this Period: 25.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 85.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 992 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DAVID C. HILTON

Mailing Address 4430 SHEPHERDS LN

City State Zip Code
LA CANADA CA 91011-3134

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13945181

Amount of Each Receipt this Period
210.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
VICKI HILTON

Mailing Address 4795 W 127TH PL

City State Zip Code
BROOMFIELD CO 80020-5738

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945564

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. BILLY R. HINDS

Mailing Address 376 TURNBERRY RD

City State Zip Code
BIRMINGHAM AL 35244-3290

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ALLCOMM EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928017

Amount of Each Receipt this Period
110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 370.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 993 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
THOMAS HINER

Mailing Address 145 WEST 67TH STREET

City State Zip Code
NEW YORK NY 10023-5923

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HUNTON & WILLIAMS LLP ATTORNEY AT LAW

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 31 / 2010
Transaction ID: SA11.13960687
Amount of Each Receipt this Period: 250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MICHAEL HINES

Mailing Address 4208 LORCOM LN

City State Zip Code
ARLINGTON VA 22207-3306

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 10 / 14 / 2010
Transaction ID: SA11.13928545
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. PATRICIA M. HINES

Mailing Address P.O. BOX 474

City State Zip Code
LESLIE GA 31764-0474

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13929590
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 400.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 994 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. RAYMOND S. HINSON

Mailing Address 1935 SIOUX CITY COURT

City State Zip Code
HENDERSON NV 89052-7043

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 401.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963585

Amount of Each Receipt this Period

151.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JAMES HINTON

Mailing Address 2215 SPANISH FOREST LN

City State Zip Code
RICHMOND TX 77406-6778

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GRAIN PROCESSING CORP SALES

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962495

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. PHYLLIS S. HINTZ

Mailing Address 1310 ADAMS AVE APT 104
APT 104

City State Zip Code
FAIRMONT MN 56031-4481

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13932047

Amount of Each Receipt this Period

60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

311.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 995 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. PHYLLIS S. HINTZ

Mailing Address 1310 ADAMS AVE APT 104
APT 104

City State Zip Code
FAIRMONT MN 56031-4481

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 1 0

Transaction ID: SA11.13972123

Amount of Each Receipt this Period
1.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN HIPSKIND

Mailing Address 3218 SCHILLING ST.

City State Zip Code
PERU IN 46970-8733

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MW INDUSTRIES VP OF SALES & MARKETING

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 1 0

Transaction ID: SA11.13972093

Amount of Each Receipt this Period
150.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. JEFFREY A. HIRSCH

Mailing Address 10516 LINDBROOK

City State Zip Code
LOS ANGELES CA 90024-3326

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952464

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **651.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 996 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RUDOLPH W. HIRZEL

Mailing Address 1559 C DRIVE S

City State Zip Code
CLIMAX MI 49034-9621

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935698

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
FAITH M. HITCHINGS

Mailing Address 1524 SANDY POINT LN.

City State Zip Code
BLOSSVALE NY 13308-2702

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.1395123

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. BARBARA HIXON

Mailing Address 14901 N. OUTER 40 APARTMENT 415

City State Zip Code
CHESTERFIELD MO 63017-2081

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938538

Amount of Each Receipt this Period
55.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 255.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 997 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
JAMES HOAK

Mailing Address 3505 TURTLE CREEK BLVD #20B

City State Zip Code
DALLAS TX 75219-5573

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOAK MEDIA CORPORATION CHAIRMAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5100.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13932403

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
JAMES HOAK

Mailing Address 3505 TURTLE CREEK BLVD #20B

City State Zip Code
DALLAS TX 75219-5573

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOAK MEDIA CORPORATION CHAIRMAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5100.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13951062

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. FRED WAYNE HOBBS

Mailing Address 529 WARNER DRIVE

City State Zip Code
LEWISTON ID 83501-4458

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928817

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5200.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 998 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT HOBBS

Mailing Address 7975 MONTEREY SHORES DR.

City State Zip Code
RENO NV 89506-3128

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 445.00

Date of Receipt
MM / DD / YYYY
10 / 14 / 2010

Transaction ID: SA11.13930739

Amount of Each Receipt this Period
30.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT HOBBS

Mailing Address 7975 MONTEREY SHORES DR.

City State Zip Code
RENO NV 89506-3128

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 445.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13945884

Amount of Each Receipt this Period
30.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. JACK B. HOBSON, SR.

Mailing Address 926 CHEROKEE ROAD

City State Zip Code
CHARLOTTE NC 28207-2242

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13941824

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **110.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 999 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. OLIVIA LOIS HOCKING

Mailing Address 225 20TH AVE. NW

City State Zip Code
BIRMINGHAM AL 35215-3441

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 615.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934125

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. OLIVIA LOIS HOCKING

Mailing Address 225 20TH AVE. NW

City State Zip Code
BIRMINGHAM AL 35215-3441

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 615.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934763

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
CINDY HODGES

Mailing Address 3116 N HANCOCK AVE

City State Zip Code
ODESSA TX 79762-7535

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949240

Amount of Each Receipt this Period
35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **115.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1000 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MARY L. HODGES

Mailing Address RR 3 BOX 164

City State Zip Code
AVA MO 65608-9507

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt
MM / DD / YYYY
10 / 27 / 2010

Transaction ID: SA11.13955803

Amount of Each Receipt this Period
105.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. RALPH M. HODGES

Mailing Address 5200 POTOMAC RD.

City State Zip Code
KNOXVILLE TN 37920-3700

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
281.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13949683

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. RALPH M. HODGES

Mailing Address 5200 POTOMAC RD.

City State Zip Code
KNOXVILLE TN 37920-3700

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
281.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13964260

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **180.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1001 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. SPENCER HODGE

Mailing Address 5021 LAKE VIEW CIR

City State Zip Code
NORTH RICHLAND HIL TX 76180-7809

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956709

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
NOLA B. HODGSON

Mailing Address 1108 6TH. ST.

City State Zip Code
AURORA NE 68818-1912

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 214.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13945038

Amount of Each Receipt this Period

35.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. HAROLD C. HODSON

Mailing Address P.O. BOX 927

City State Zip Code
MILLERSPORT OH 43046-0927

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953658

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

235.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1002 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. DARBY HOE HOEGGER

Mailing Address 1098B ARGYLL CIR

City State Zip Code
LAKEWOOD NJ 08701-6948

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1550.00

Date of Receipt: MM / DD / YYYY
10 / 14 / 2010

Transaction ID: SA11.13930119

Amount of Each Receipt this Period: 600.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
TYLER HOEKE

Mailing Address 102 CHIPPENDALE CT

City State Zip Code
LOS GATOS CA 95032-1604

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CAIN-WHITE AND COMPANY PRESIDENT AND CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13946878

Amount of Each Receipt this Period: 400.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CARL HOELLE

Mailing Address 6545 N 1ST PL.

City State Zip Code
PHOENIX AZ 85012-1134

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt: MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13935133

Amount of Each Receipt this Period: 20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1020.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1003 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
CARL HOELLE

Mailing Address 6545 N 1ST PL.

City State Zip Code
PHOENIX AZ 85012-1134

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt M M / D D / Y Y Y Y
10 / 18 / 2010

Transaction ID: SA11.13937970

Amount of Each Receipt this Period 25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. PAUL G. HOERTZ

Mailing Address 2 ONEOATA CT

City State Zip Code
CENTERPORT NY 11721-1408

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt M M / D D / Y Y Y Y
10 / 25 / 2010

Transaction ID: SA11.13954177

Amount of Each Receipt this Period 35.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. RICHARD T. HOFF

Mailing Address 3719 RUBY ST. APT. 4

City State Zip Code
SCHILLER PARK IL 60176-2454

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
H.M.S. HOST CLERK

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1230.00

Date of Receipt M M / D D / Y Y Y Y
10 / 21 / 2010

Transaction ID: SA11.13945768

Amount of Each Receipt this Period 40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1004 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. RICHARD T. HOFF		Date of Receipt
	Mailing Address 3719 RUBY ST. APT. 4		<input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	SCHILLER PARK	IL	60176-2454
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer H.M.S. HOST		Occupation CLERK	Transaction ID: SA11.13945769
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1230.00"/>	<input type="text" value="40.00"/>
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) MR. RICHARD T. HOFF		Date of Receipt
	Mailing Address 3719 RUBY ST. APT. 4		<input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	SCHILLER PARK	IL	60176-2454
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer H.M.S. HOST		Occupation CLERK	Transaction ID: SA11.13945770
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1230.00"/>	<input type="text" value="40.00"/>
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) MR. RICHARD T. HOFF		Date of Receipt
	Mailing Address 3719 RUBY ST. APT. 4		<input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	SCHILLER PARK	IL	60176-2454
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer H.M.S. HOST		Occupation CLERK	Transaction ID: SA11.13945771
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1230.00"/>	<input type="text" value="40.00"/>
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="120.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1005 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RICHARD T. HOFF

Mailing Address 3719 RUBY ST. APT. 4

City State Zip Code
SCHILLER PARK IL 60176-2454

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
H.M.S. HOST CLERK

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13945772

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RICHARD T. HOFF

Mailing Address 3719 RUBY ST. APT. 4

City State Zip Code
SCHILLER PARK IL 60176-2454

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
H.M.S. HOST CLERK

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13945774

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RICHARD T. HOFF

Mailing Address 3719 RUBY ST. APT. 4

City State Zip Code
SCHILLER PARK IL 60176-2454

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
H.M.S. HOST CLERK

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13945960

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 120.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1006 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MR. RICHARD T. HOFF</p> <p>Mailing Address 3719 RUBY ST. APT. 4</p> <hr/> <p>City State Zip Code SCHILLER PARK IL 60176-2454</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation H.M.S. HOST CLERK</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1230.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 21 / 2010</p> <p>Transaction ID: SA11.13946071</p> <p>Amount of Each Receipt this Period 40.00</p> <p>CONTRIBUTION</p>
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<p>B. Full Name (Last, First, Middle Initial) MR. RICHARD T. HOFF</p> <p>Mailing Address 3719 RUBY ST. APT. 4</p> <hr/> <p>City State Zip Code SCHILLER PARK IL 60176-2454</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation H.M.S. HOST CLERK</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1230.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 21 / 2010</p> <p>Transaction ID: SA11.13946431</p> <p>Amount of Each Receipt this Period 40.00</p> <p>CONTRIBUTION</p>
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<p>C. Full Name (Last, First, Middle Initial) MR. RICHARD T. HOFF</p> <p>Mailing Address 3719 RUBY ST. APT. 4</p> <hr/> <p>City State Zip Code SCHILLER PARK IL 60176-2454</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation H.M.S. HOST CLERK</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1230.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 21 / 2010</p> <p>Transaction ID: SA11.13946502</p> <p>Amount of Each Receipt this Period 40.00</p> <p>CONTRIBUTION</p>
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SUBTOTAL of Receipts This Page (optional)	120.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1007 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. RICHARD T. HOFF

Mailing Address 3719 RUBY ST. APT. 4

City State Zip Code
SCHILLER PARK IL 60176-2454

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
H.M.S. HOST CLERK

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946516

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. RICHARD T. HOFF

Mailing Address 3719 RUBY ST. APT. 4

City State Zip Code
SCHILLER PARK IL 60176-2454

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
H.M.S. HOST CLERK

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946520

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. RICHARD T. HOFF

Mailing Address 3719 RUBY ST. APT. 4

City State Zip Code
SCHILLER PARK IL 60176-2454

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
H.M.S. HOST CLERK

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948980

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **120.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1008 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. RICHARD T. HOFF

Mailing Address 3719 RUBY ST. APT. 4

City State Zip Code
SCHILLER PARK IL 60176-2454

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
H.M.S. HOST CLERK

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954501

Amount of Each Receipt this Period

40.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. BRUCE N. HOFFMAN, JR.

Mailing Address 13024 SALEM AVE

City State Zip Code
HAGERSTOWN MD 21740-3550

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MARTIN'S ELEVATOR INC. BILLING CLERK

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 551.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946673

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
RAYMOND F. HOFFMAN

Mailing Address 10881 LAKE FOREST DR.

City State Zip Code
CONROE TX 77384-3247

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 1 0

Transaction ID: SA11.13966593

Amount of Each Receipt this Period

1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

141.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1009 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. ROBERT D. HOFFMAN	Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 1 0
	Mailing Address 6108 RIDGETOP TERRACE	Transaction ID: SA11.13933258
	City State Zip Code BAKERSFIELD CA 93306-3236	Amount of Each Receipt this Period 26.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 226.00	

B.	Full Name (Last, First, Middle Initial) MR. ROBERT M. HOFFMAN	Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 1 0
	Mailing Address 3400 S GOLDENROD LN	Transaction ID: SA11.13947180
	City State Zip Code SIOUX FALLS SD 57110-4430	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 215.00	

C.	Full Name (Last, First, Middle Initial) MR. ROBERT M. HOFFMAN	Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 8 / 2 0 1 0
	Mailing Address 3400 S GOLDENROD LN	Transaction ID: SA11.13971433
	City State Zip Code SIOUX FALLS SD 57110-4430	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 215.00	

SUBTOTAL of Receipts This Page (optional)	▶	106.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1010 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOHN R. HOFMANN

Mailing Address 3206 FESTUS DR.

City State Zip Code
AUSTIN TX 78748-1874

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation HUMAN RESOURCES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
460.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936223

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. EDWARD J. HOGAN

Mailing Address 900 WEST STAFFORD ROAD

City State Zip Code
THOUSAND OAKS CA 91361-5333

FEC ID number of contributing federal political committee. **C**

Name of Employer HOGAN FAMILY FOUNDATION
Occupation PRINCIPAL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13948209

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. TONIAN HOHBERG

Mailing Address 919 SOUTH GRAND AVENUE

City State Zip Code
LOS ANGELES CA 90015-1421

FEC ID number of contributing federal political committee. **C**

Name of Employer FIDM
Occupation PRESIDENT AND CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13942468

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **6100.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1011 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. GEORGE C. HOHL

Mailing Address 4800 W 87TH ST

City State Zip Code
PRAIRIE VLG KS 66207-1848

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GALVIOR EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13951967

Amount of Each Receipt this Period
201.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. FREDERICK HOHMANN

Mailing Address 30 WHITE LAKE ROAD

City State Zip Code
SPARTA NJ 07871

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
H&H PRODUCTION MACHINING INC PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935045

Amount of Each Receipt this Period
300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. C. RAY HOLBROOK

Mailing Address 1420 AVENUE L

City State Zip Code
SANTA FE TX 77510-8900

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954790

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **601.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1012 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. THOMAS HOLBROOK

Mailing Address 1238 US HWY 52

City State Zip Code
MINOOKA IL 60447-9721

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943544

Amount of Each Receipt this Period
55.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. TIM HOLDEN

Mailing Address 9217 WOODVALE DRIVE

City State Zip Code
DAMASCUS MD 20872-1061

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959135

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ELLIS HOLDINESS

Mailing Address 269 HUBERT HOLDINESS ROAD

City State Zip Code
LOUISVILLE MS 39339-6725

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 361.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956073

Amount of Each Receipt this Period
1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 256.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1013 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MERCY HOLIDAY

Mailing Address 5430 KATHERINE AVE

City State Zip Code
SHERMAN OAKS CA 91401-4921

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931582

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAN E. HOLLAND

Mailing Address 118 PEARLE COVE DR

City State Zip Code
HUNTSVILLE AL 35806-4243

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PESA MANAGER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 690.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13962476

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES C. HOLLAND, JR.

Mailing Address 1904 LEE STREET

City State Zip Code
BOSSIER CITY LA 71112-2026

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BALDWIN & BALDWIN PILOT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13965356

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 140.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1014 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. WILLIAM HOLLAND

Mailing Address 603 PETER PAUL DR

City State Zip Code
WEST ISLIP NY 11795-3515

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CAVALIER HOMES PRESIDENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 310.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934795

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. DAN HOLLEY

Mailing Address 812 COUNTRY CLUB DR

City State Zip Code
ROCKWALL TX 75032-5930

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AIG VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948332

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
ERIC HOLLEY

Mailing Address 1478 ASHWOODY COURT

City State Zip Code
ATLANTA GA 30319-1404

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EHOSTAR COMPUTER PROGRAMMER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951450

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

500.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1015 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) HELEN F. HOLLEN	Date of Receipt MM / DD / YYYY 10 / 29 / 2010
	Mailing Address 811 N 6TH ST APT 8	Transaction ID: SA11.13962162
	City State Zip Code RED OAK IA 51566-1963	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.00	

B.	Full Name (Last, First, Middle Initial) MR. JACK P. HOLLE	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 7 CHUCKANUT LN	Transaction ID: SA11.13954355
	City State Zip Code HOUSTON TX 77024-7301	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

C.	Full Name (Last, First, Middle Initial) MR. JOHN A. HOLLINSHEAD	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 396 ESTANCIA LANE	Transaction ID: SA11.13948198
	City State Zip Code BOERNE TX 78006-8143	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation LYONDELL CHEMICAL CO. V. P. - HUMAN RESOURCES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	580.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1016 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOHN P. HOLLIHAN

Mailing Address 16 HOLLOW BROOK LANE

City State Zip Code
CANAAAN CT 06018-2305

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LITCHFIELD CAPTIL HOLDINGS BANKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13951136
Amount of Each Receipt this Period: 5000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. JOYCE J. HOLLOWAY

Mailing Address 6501 S RICE AVE

City State Zip Code
BELLAIRE TX 77401-3306

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOLLOWAY PRESCHOOL & DAYC-ARE OWNER & DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13955105
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CHERYL HOLMES

Mailing Address 2420 E DEL RIO DR

City State Zip Code
TEMPE AZ 85282-4133

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13948219
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **5150.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1017 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
G BURIT HOLMES

Mailing Address 8231 BAY COLONY DR. APT. 804

City State Zip Code
NAPLES FL 34108-7792

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953989

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DEBORAH HOLSTEIN

Mailing Address 286 BEAUVOIR RD.

City State Zip Code
BILOXI MS 39531-4004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED COMMERCIAL INTERIOR DESIGNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962603

Amount of Each Receipt this Period

105.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. HAROLD JACK HOLT

Mailing Address 400 SARAH ELIZABETH WAY

City State Zip Code
TAYLORSVILLE KY 40071-8780

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 471.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930237

Amount of Each Receipt this Period

101.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

456.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1018 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. HAROLD JACK HOLT

Mailing Address 400 SARAH ELIZABETH WAY

City State Zip Code
TAYLORSVILLE KY 40071-8780

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 471.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943391

Amount of Each Receipt this Period

70.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. RICKY HOLT

Mailing Address PO BOX 559

City State Zip Code
LOUISVILLE GA 30434-0559

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 245.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955717

Amount of Each Receipt this Period

85.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JAMES HOLTEN

Mailing Address 4003 CHESTNUT OAK DR

City State Zip Code
SMITHTON IL 62285-3741

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOLTEN MEATS CEO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 211.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939834

Amount of Each Receipt this Period

1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

156.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1019 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. HERBERT HOLTON

Mailing Address 402 W ROSE DR

City State Zip Code
TECUMSEH OK 74873-1303

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
226.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13933097

Amount of Each Receipt this Period
41.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. HERBERT HOLTON

Mailing Address 402 W ROSE DR

City State Zip Code
TECUMSEH OK 74873-1303

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
226.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	9	/	2	0	1	0

Transaction ID: SA11.13961832

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES H. HOLVE

Mailing Address 246 N. SWEETBRIAR AVENUE

City State Zip Code
LINDSAY CA 93247-2419

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	6	/	2	0	1	0

Transaction ID: SA11.13951393

Amount of Each Receipt this Period
350.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **431.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1020 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. KLARA HOLZER

Mailing Address 299 ARGUELLO BOULEVARD
APARTMENT 302

City State Zip Code
SAN FRANCISCO CA 94118-1434

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
211.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935254

Amount of Each Receipt this Period
55.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PETER HOMAN

Mailing Address 15914 MONCURE DR.

City State Zip Code
DUMFRIES VA 22025-1351

FEC ID number of contributing federal political committee. **C**

Name of Employer ABEL IND
Occupation SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930595

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PETER HOMAN

Mailing Address 15914 MONCURE DR.

City State Zip Code
DUMFRIES VA 22025-1351

FEC ID number of contributing federal political committee. **C**

Name of Employer ABEL IND
Occupation SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954889

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **205.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1021 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. MABEL R. HOMZA		Date of Receipt																					
	Mailing Address 902 PADGETT RD.		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	1	/	2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	1	/	0	1	/	2	0	1	0														
	City State Zip Code PONCE DE LEON FL 32455-5971		Transaction ID: SA11.13962883																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: RETIRED Occupation: RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 420.00																						

CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) S C. HONG		Date of Receipt																					
	Mailing Address 4315 MELISSA LN		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>2</td><td>5</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	5	/	2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0	/	2	5	/	2	0	1	0														
	City State Zip Code DALLAS TX 75229-4114		Transaction ID: SA11.13951688																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: SELF-EMPLOYED Occupation: DENTIST Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00																						

CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MR. ADOLF U. HONKALA		Date of Receipt																					
	Mailing Address 1500 WESTBROOK CT. APT. 2101		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>2</td><td>6</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	6	/	2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0	/	2	6	/	2	0	1	0														
	City State Zip Code RICHMOND VA 23227-3369		Transaction ID: SA11.13957087																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: SELF-EMPLOYED Occupation: CONSULTING GEOLOGIST Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 430.00																						

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	▶	220.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1022 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. LARRY K. HONSBERGER

Mailing Address 3406 COUNTY ROAD 149

City State Zip Code
ELMORE OH 43416-9602

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
US POST OFFICE RURAL MAIL CARRIER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 366.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943698

Amount of Each Receipt this Period 50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. LARRY K. HONSBERGER

Mailing Address 3406 COUNTY ROAD 149

City State Zip Code
ELMORE OH 43416-9602

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
US POST OFFICE RURAL MAIL CARRIER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 366.00

Date of Receipt M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963325

Amount of Each Receipt this Period 50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
CYNTHIA HOOD

Mailing Address 5005 E 117 ST

City State Zip Code
TULSA OK 74137-8405

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13948173

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 1100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1023 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. THOMAS E. HOOD

Mailing Address 1514 N 1880 W

City State Zip Code
PROVO UT 84604-2232

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13931386

Amount of Each Receipt this Period 50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DONALD HOOK

Mailing Address 29518 WINDING BROOK DR.

City State Zip Code
MENIFEE CA 92584-7715

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt M M / D D / Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13969657

Amount of Each Receipt this Period 40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. MARY E. HOOKER

Mailing Address 9510 MIDER DR.

City State Zip Code
SAN ANTONIO TX 78216-4351

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
PRYSTASH INS. AGENCY BOOKKEEPER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959514

Amount of Each Receipt this Period 25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 115.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1024 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. MARY E. HOOKER
Mailing Address 9510 MIDER DR.
City SAN ANTONIO State TX Zip Code 78216-4351
FEC ID number of contributing federal political committee. **C**
Name of Employer PRYSTASH INS. AGENCY Occupation BOOKKEEPER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 285.00
Date of Receipt 10 / 28 / 2010
Transaction ID: SA11.13959551
Amount of Each Receipt this Period 25.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MARY E. HOOKER
Mailing Address 9510 MIDER DR.
City SAN ANTONIO State TX Zip Code 78216-4351
FEC ID number of contributing federal political committee. **C**
Name of Employer PRYSTASH INS. AGENCY Occupation BOOKKEEPER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 285.00
Date of Receipt 10 / 28 / 2010
Transaction ID: SA11.13959832
Amount of Each Receipt this Period 25.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MAX J. HOOKER
Mailing Address 16815 CHANDLER STREET
City OMAHA State NE Zip Code 68136-2116
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 285.00
Date of Receipt 10 / 14 / 2010
Transaction ID: SA11.13918783
Amount of Each Receipt this Period 75.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 125.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1025 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. WILLIAM HOOPER, JR.

Mailing Address PO BOX 1692

City State Zip Code
CONROE TX 77305-1692

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955788

Amount of Each Receipt this Period

210.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
HELEN HOOVER

Mailing Address 2645 E SOUTHERN AVE
APT A235

City State Zip Code
TEMPE AZ 85282-7689

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 675.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931666

Amount of Each Receipt this Period

210.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
HELEN HOOVER

Mailing Address 2645 E SOUTHERN AVE
APT A235

City State Zip Code
TEMPE AZ 85282-7689

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 675.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13971277

Amount of Each Receipt this Period

315.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

735.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1026 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. HELENE MAE HOOVER

Mailing Address 2645 E SOUTHERN AVE A-235

City State Zip Code
TEMPE AZ 85282-7649

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 4240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13952618

Amount of Each Receipt this Period
450.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. HELENE MAE HOOVER

Mailing Address 2645 E SOUTHERN AVE A-235

City State Zip Code
TEMPE AZ 85282-7649

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 4240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	8	/	2	0	1	0

Transaction ID: SA11.13971201

Amount of Each Receipt this Period
450.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT B. HOOVER

Mailing Address 1229 COLUMBIANA LISBON RD LOT

City State Zip Code
COLUMBIANA OH 44408-2218

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 290.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	1	0

Transaction ID: SA11.13945473

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **950.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1027 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. RUTH HOOVER

Mailing Address 34176 HOLKINS RD

City State Zip Code
PHILADELPHIA NY 13673-2101

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 335.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13950297

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
JAMES HOPES

Mailing Address 509 POINCIANA DRIVE

City State Zip Code
FT. LAUDERDALE FL 33301-2705

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt
MM / DD / YYYY
10 / 23 / 2010

Transaction ID: SA11.13947666

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. BILL J. HORNE, SR.

Mailing Address P.O. BOX 1543

City State Zip Code
ADA OK 74821-1543

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED CPA-BANKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 602.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13935498

Amount of Each Receipt this Period
402.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **492.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1028 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. ELSIE HORNER

Mailing Address P.O. BOX 6435

City State Zip Code
KENT WA 98064-6435

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 336.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935432

Amount of Each Receipt this Period

1.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. ELSIE HORNER

Mailing Address P.O. BOX 6435

City State Zip Code
KENT WA 98064-6435

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 336.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13938264

Amount of Each Receipt this Period

15.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. ELSIE HORNER

Mailing Address P.O. BOX 6435

City State Zip Code
KENT WA 98064-6435

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 336.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13947178

Amount of Each Receipt this Period

20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

36.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1029 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
GREGORY M. HORNE

Mailing Address 104 MISSION RDG

City State Zip Code
MADISON MS 39110-7601

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
OMHORNE LLC MATERIALS DISTRIBUTOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 380.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934842

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
GREGORY M. HORNE

Mailing Address 104 MISSION RDG

City State Zip Code
MADISON MS 39110-7601

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
OMHORNE LLC MATERIALS DISTRIBUTOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 380.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 7 / 2 0 1 0

Transaction ID: SA11.13969841

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. TERRI A. HORNER

Mailing Address 126 S PLUM ST APT 102
APARTMENT 102

City State Zip Code
VERMILLION SD 57069-3357

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 251.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935122

Amount of Each Receipt this Period
10.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

210.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1030 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. TERRI A. HORNER	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 126 S PLUM ST APT 102 APARTMENT 102	Transaction ID: SA11.13938317
	City State Zip Code VERMILLION SD 57069-3357	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	

B.	Full Name (Last, First, Middle Initial) MRS. TERRI A. HORNER	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 126 S PLUM ST APT 102 APARTMENT 102	Transaction ID: SA11.13943433
	City State Zip Code VERMILLION SD 57069-3357	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	

C.	Full Name (Last, First, Middle Initial) MR. RICHARD HOROWITZ	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 9301 WILSHIRE BLVD. SUITE 615	Transaction ID: SA11.13957635
	City State Zip Code BEVERLY HILLS CA 90210-6172	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation MANAGEMENT BROKERS HORIZONS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	5040.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1031 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. WILL HORSLEY

Mailing Address 6 EVERGREEN LN

City State Zip Code
ANDOVER MA 01810-4411

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED MEDICAL

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 380.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 18 / 2010

Transaction ID: SA11.13971352

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ALVIN W. HORTON

Mailing Address 14905 BOTHELL EVERETT HWY. APT

City State Zip Code
MILL CREEK WA 98012-5368

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 14 / 2010

Transaction ID: SA11.13930093

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ALVIN W. HORTON

Mailing Address 14905 BOTHELL EVERETT HWY. APT

City State Zip Code
MILL CREEK WA 98012-5368

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 19 / 2010

Transaction ID: SA11.13940904

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

200.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1032 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
FRANCES HORTON

Mailing Address 1178 SHEPHERDS WAY

City State Zip Code
GRACEVILLE FL 32440-1911

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957196

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM G. HORTSMAN

Mailing Address 985 TRACKERS GLEN AVE

City State Zip Code
HENDERSON NV 89015-2934

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952863

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GEORGE M. HORVATH

Mailing Address 4991 AZALEA CIRCLE

City State Zip Code
SAINT GEORGE UT 84790-4909

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936157

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 250.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1033 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. ELAINE HOSETH

Mailing Address 5051 77TH AVENUE NW

City State Zip Code
STANLEY ND 58784-9087

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13947775

Amount of Each Receipt this Period
85.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JESSIE HOSKINS

Mailing Address 8563 NEW HAVEN RD.

City State Zip Code
HARRISON OH 45030-9739

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13931361

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CHARLES HOTCHKISS

Mailing Address 445 BROWN BEAR LN

City State Zip Code
COLORADO SPRINGS CO 80906-3222

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918454

Amount of Each Receipt this Period
85.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 270.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1034 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. KATHLEEN M. HOUGH

Mailing Address 9701 SPRING RIDGE LN.

City VIENNA State VA Zip Code 22182-1450

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13928954
Amount of Each Receipt this Period: 110.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. HANNAH HOUSMAN

Mailing Address 1047 50TH. ST. APT. 2
APARTMENT 2

City BROOKLYN State NY Zip Code 11219-3340

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 286.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13933053
Amount of Each Receipt this Period: 26.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. HANNAH HOUSMAN

Mailing Address 1047 50TH. ST. APT. 2
APARTMENT 2

City BROOKLYN State NY Zip Code 11219-3340

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 286.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13948935
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 161.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1035 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. HANNAH HOUSMAN	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 1047 50TH. ST. APT. 2 APARTMENT 2	Transaction ID: SA11.13955807
	City State Zip Code BROOKLYN NY 11219-3340	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 286.00	

B.	Full Name (Last, First, Middle Initial) GARY EARL HOVERSTEN	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 802 HIGH ST.	Transaction ID: SA11.13937315
	City State Zip Code WEBSTER CITY IA 50595-2524	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

C.	Full Name (Last, First, Middle Initial) GARY EARL HOVERSTEN	Date of Receipt MM / DD / YYYY 11 / 02 / 2010
	Mailing Address 802 HIGH ST.	Transaction ID: SA11.13964764
	City State Zip Code WEBSTER CITY IA 50595-2524	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

SUBTOTAL of Receipts This Page (optional)	▶	100.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1036 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) GARY EARL HOVERSTEN		Date of Receipt
	Mailing Address 802 HIGH ST.		<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	WEBSTER CITY	IA	50595-2524
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13965550
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Amount of Each Receipt this Period	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="25.00"/>	
Occupation INFORMATION REQUESTED PER BEST EFFORTS		CONTRIBUTION	
Aggregate Year-to-Date ▼			
<input type="text" value="525.00"/>			

B.	Full Name (Last, First, Middle Initial) GARY EARL HOVERSTEN		Date of Receipt
	Mailing Address 802 HIGH ST.		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	WEBSTER CITY	IA	50595-2524
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13966101
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Amount of Each Receipt this Period	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="25.00"/>	
Occupation INFORMATION REQUESTED PER BEST EFFORTS		CONTRIBUTION	
Aggregate Year-to-Date ▼			
<input type="text" value="525.00"/>			

C.	Full Name (Last, First, Middle Initial) MR. BOYD HOWARD		Date of Receipt
	Mailing Address P.O. BOX 334		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	GRAPELAND	TX	75844-0334
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13962491
Name of Employer RETIRED		Amount of Each Receipt this Period	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="50.00"/>	
Occupation RETIRED		CONTRIBUTION	
Aggregate Year-to-Date ▼			
<input type="text" value="320.00"/>			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="100.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1037 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CHARLES G. HOWARD	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address P.O. BOX 471	Transaction ID: SA11.13933293
	City State Zip Code MORGANTOWN KY 42261-0471	Amount of Each Receipt this Period 51.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.00	

B.	Full Name (Last, First, Middle Initial) MRS. CLARA H. HOWARD	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 148 PRINCE ROYAL DR	Transaction ID: SA11.13955834
	City State Zip Code CORTE MADERA CA 94925-2031	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 335.00	

C.	Full Name (Last, First, Middle Initial) MR. HARVEY J. HOWARD	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 223 RICHMOND ST	Transaction ID: SA11.13951787
	City State Zip Code LANCASTER KY 40444-1104	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1101.00	

SUBTOTAL of Receipts This Page (optional) ►

176.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1038 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. HARVEY J. HOWARD	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 223 RICHMOND ST	Transaction ID: SA11.13953556
	City State Zip Code LANCASTER KY 40444-1104	Amount of Each Receipt this Period 51.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1101.00	

B.	Full Name (Last, First, Middle Initial) MR. THOMAS HOWARD	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 2004 COCHRAN RD	Transaction ID: SA11.13931772
	City State Zip Code MARYVILLE TN 37803-2807	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	

C.	Full Name (Last, First, Middle Initial) MS. VIRGINIA M. HOWARD	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 24846 20TH. AVE S	Transaction ID: SA11.13954099
	City State Zip Code KENT WA 98032-4023	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 266.00	

SUBTOTAL of Receipts This Page (optional)	▶	101.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1039 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. VIRGINIA M. HOWARD

Mailing Address 24846 20TH. AVE S

City State Zip Code
KENT WA 98032-4023

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
266.00

Date of Receipt
MM / DD / YYYY
11 / 19 / 2010

Transaction ID: SA11.13972070

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. WILMA M. HOWARD

Mailing Address 13300 INDIAN ROCKS RD. APT. 15
APARTMENT 1504

City State Zip Code
LARGO FL 33774-2042

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
251.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2010

Transaction ID: SA11.13956266

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. WILMA M. HOWARD

Mailing Address 13300 INDIAN ROCKS RD. APT. 15
APARTMENT 1504

City State Zip Code
LARGO FL 33774-2042

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
251.00

Date of Receipt
MM / DD / YYYY
10 / 29 / 2010

Transaction ID: SA11.13961407

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **125.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1040 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DON N. HOWELL

Mailing Address 1642 SILVER HILL RD

City State Zip Code
STONE MTN GA 30087-2209

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1900.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940648

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. TIMOTHY R. HOWELL

Mailing Address 3707 HIGHWAY 15 N

City State Zip Code
LAUREL MS 39440-1446

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED FARMER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13972864

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MAURICE HOWER

Mailing Address 342 E ADAMS ST

City State Zip Code
ORLEANS IN 47452-1405

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13965420

Amount of Each Receipt this Period
20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1020.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1041 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. STEPHEN F. HOWLER

Mailing Address 599 WALLACE RD

City State Zip Code
CHERAW SC 29520-6519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED ENGINEER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940607

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. WALTER W. HOWLAND

Mailing Address 37814 S GOLF COURSE DR.

City State Zip Code
TUCSON AZ 85739-1156

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956485

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. SCOTT W. HOWLETT

Mailing Address 14 CRYSTAL TREE PASS

City State Zip Code
HENDERSON NV 89052-6701

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941931

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

310.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1042 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. CHARLES HOYE	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 8103 N 188TH EAST AVE	Transaction ID: SA11.13946557
	City State Zip Code OWASSO OK 74055-8236	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 306.44	

B.	Full Name (Last, First, Middle Initial) MR. CHARLES HOYE	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 8103 N 188TH EAST AVE	Transaction ID: SA11.13954053
	City State Zip Code OWASSO OK 74055-8236	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 306.44	

C.	Full Name (Last, First, Middle Initial) MR. CHARLES HOYE	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 8103 N 188TH EAST AVE	Transaction ID: SA11.13956996
	City State Zip Code OWASSO OK 74055-8236	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 306.44	

SUBTOTAL of Receipts This Page (optional)	60.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1043 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT HROMADNIK

Mailing Address P.O. BOX 562

City State Zip Code
OSAWATOMIE KS 66064-0562

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1150.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956729

Amount of Each Receipt this Period
600.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CHARLES N. HUBBARD, M.D.

Mailing Address 210 HABERSHAM PL

City State Zip Code
CARROLLTON GA 30117-4152

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 7 / 2 0 1 0

Transaction ID: SA11.13969917

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HOWARD HUBBARD

Mailing Address P.O. BOX 32

City State Zip Code
LEXINGTON TN 38351-0032

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 245.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934741

Amount of Each Receipt this Period
35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1135.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1044 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JOHN A. HUBBARD
Mailing Address 129 HERON PT

City State Zip Code
CHESTERTOWN MD 21620-1673

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1425.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Transaction ID: SA11.13968112

Amount of Each Receipt this Period
150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. MARTIN L. HUBBARD
Mailing Address 3500 20TH. AVENUE CT. SE

City State Zip Code
PUYALLUP WA 98372-4252

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NICHOLSON'S PHARMACY INC PHARMACIST

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 290.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941772

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. MARK S. HUBBARD
Mailing Address 5205 ELECTRIC AVE

City State Zip Code
HAMBURG NY 14075-7537

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 475.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13960552

Amount of Each Receipt this Period
75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

475.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1045 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. PAUL D. HUDGENS

Mailing Address 5275 SUNSET DR

City State Zip Code
LITTLETON CO 80123-1418

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SCHLEMBERGER ENGINEER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918891

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. BART HUDSON

Mailing Address 5805 IPSWICH ROAD

City State Zip Code
BETHESDA MD 20814-1807

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FLORIDA HOUSE PRESIDENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13951066

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. STEPHEN E. HUDSON

Mailing Address 1515 PATHFINDER WAY SW

City State Zip Code
LILBURN GA 30047-2352

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
KILPATRICK STOCKTON LLP ATTORNEY

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934983

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1046 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ALLEN S. HUDSPETH

Mailing Address 211 KNOLLWOOD ST

City State Zip Code
WINSTON SALEM NC 27104-4129

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 326.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935048

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ALLEN S. HUDSPETH

Mailing Address 211 KNOLLWOOD ST

City State Zip Code
WINSTON SALEM NC 27104-4129

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 326.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 1 0

Transaction ID: SA11.13972008

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ROBERT L. HUFF

Mailing Address 5020 PHILADELPHIA DR

City State Zip Code
DAYTON OH 45415

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955010

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1050.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1047 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. GREGORY A. HUFFMAN	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 1043 CABERNET DR	Transaction ID: SA11.13944045
	City State Zip Code CHESTERFIELD MO 63017-8339	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer DRS TECHNOLOGIES INC.	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) MR. ARTHUR M. HUGHES	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 2100 S OCEAN DR APT 16A	Transaction ID: SA11.13928993
	City State Zip Code FORT LAUDERDALE FL 33316-3844	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer KNOWLEDGE BASED	Occupation MARKETING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1220.00	

C.	Full Name (Last, First, Middle Initial) MR. BILLY F. HUGHES	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 908 9TH AVE W	Transaction ID: SA11.13951488
	City State Zip Code SPENCER IA 51301-3123	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

SUBTOTAL of Receipts This Page (optional)	▶	260.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1048 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
EDWARD C. HUGHES

Mailing Address 5419 TUNBRIDGE CROSSING

City State Zip Code
FORT WAYNE IN 46815-8536

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TEC-HACKETT INC PRESIDENT/CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13929675
Amount of Each Receipt this Period: 250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GLEN F. HUGHES

Mailing Address 102 HONEYSUCKLE LN QUAIL ARBOR
QUAIL ARBOR V

City State Zip Code
SUMMERVILLE SC 29485-5413

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13933819
Amount of Each Receipt this Period: 15.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GLEN F. HUGHES

Mailing Address 102 HONEYSUCKLE LN QUAIL ARBOR
QUAIL ARBOR V

City State Zip Code
SUMMERVILLE SC 29485-5413

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13936297
Amount of Each Receipt this Period: 15.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 280.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1049 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
GLEN F. HUGHES

Mailing Address 102 HONEYSUCKLE LN QUAIL ARBOR
QUAIL ARBOR V

City State Zip Code
SUMMERVILLE SC 29485-5413

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 370.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943594

Amount of Each Receipt this Period
10.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
GLEN F. HUGHES

Mailing Address 102 HONEYSUCKLE LN QUAIL ARBOR
QUAIL ARBOR V

City State Zip Code
SUMMERVILLE SC 29485-5413

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 370.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956171

Amount of Each Receipt this Period
20.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
GLEN F. HUGHES

Mailing Address 102 HONEYSUCKLE LN QUAIL ARBOR
QUAIL ARBOR V

City State Zip Code
SUMMERVILLE SC 29485-5413

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 370.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963314

Amount of Each Receipt this Period
10.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

40.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1050 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. JAMES W. HUGHES

Mailing Address P.O. BOX 395

City

RINGOES

State

NJ

Zip Code

08551-0395

FEC ID number of contributing federal political committee.

C

Name of Employer
POWER SURVEY CO.

Occupation
VP REGULATORY AFFAIR

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928030

Amount of Each Receipt this Period

160.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RICHARD C. HUGHES

Mailing Address 100 SAINT ANDREWS DR.

City

SCHERERVILLE

State

IN

Zip Code

46375-2953

FEC ID number of contributing federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13960087

Amount of Each Receipt this Period

300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. T. J. HUGHES

Mailing Address 1940 WEST GAINES

City

LAWRENCEBURG

State

TN

Zip Code

38464-3048

FEC ID number of contributing federal political committee.

C

Name of Employer
PRIME SEATING LLC

Occupation
MANAGER

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955863

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

660.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1051 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
TIMOTHY HUGHES

Mailing Address 6513 TUCKER AVENUE

City State Zip Code
MCLEAN VA 22101-5268

FEC ID number of contributing federal political committee. **C**

Name of Employer
SPACE EXPLORATION TECHNOLOGIES

Occupation
ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13964445

Amount of Each Receipt this Period

350.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
JAMES S. HUI

Mailing Address 20151 HARDWOOD TER

City State Zip Code
ASHBURN VA 20147-2750

FEC ID number of contributing federal political committee. **C**

Name of Employer
VDOT

Occupation
ENGRG TECHNICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940603

Amount of Each Receipt this Period

35.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
JAMES S. HUI

Mailing Address 20151 HARDWOOD TER

City State Zip Code
ASHBURN VA 20147-2750

FEC ID number of contributing federal political committee. **C**

Name of Employer
VDOT

Occupation
ENGRG TECHNICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13945714

Amount of Each Receipt this Period

35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

420.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1052 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MISS JANET M. HUIZENGA
 Mailing Address 502 JENKRAN WAY UNIT 5
 City MORRISON State IL Zip Code 61270-3081
 Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13957300
 Amount of Each Receipt this Period: 110.00
 CONTRIBUTION
 FEC ID number of contributing federal political committee: C
 Name of Employer: RETIRED Occupation: RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date: 325.00

B. Full Name (Last, First, Middle Initial)
MRS. SUZANNE HUIZINGA
 Mailing Address 1231 ELMHURST DR
 City INDIANAPOLIS State IN Zip Code 46219-3622
 Date of Receipt: 11 / 01 / 2010
Transaction ID: SA11.13964184
 Amount of Each Receipt this Period: 40.00
 CONTRIBUTION
 FEC ID number of contributing federal political committee: C
 Name of Employer: RETIRED Occupation: RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date: 330.00

C. Full Name (Last, First, Middle Initial)
MR. FRED T. HULL
 Mailing Address 49856 VIA CONQUISTADOR
 City LA QUINTA State CA Zip Code 92253-8421
 Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13954657
 Amount of Each Receipt this Period: 150.00
 CONTRIBUTION
 FEC ID number of contributing federal political committee: C
 Name of Employer: INFORMATION REQUESTED PER BEST EFFORTS Occupation: INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date: 400.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1053 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
KATHLEEN F. HULL

Mailing Address 30 NEW BRITAIN AVE

City State Zip Code
UNIONVILLE CT 06085-1291

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 395.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946863

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ROBERT B. HULL, JR.

Mailing Address 3534 CARRIAGE HILL CIR
APARTMENT 2

City State Zip Code
RANDALLSTOWN MD 21133

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 241.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958542

Amount of Each Receipt this Period

41.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
TERRANCE HUMMEL

Mailing Address P.O. BOX 706

City State Zip Code
OAKLAND IA 51560-0706

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959699

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

191.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1054 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
CYNTHIA E. HUMPHREYS

Mailing Address 1347 LAMAR SQUARE DR. APT. 201

City State Zip Code
AUSTIN TX 78704-2242

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation SALES CLERK

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13946245
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
CYNTHIA E. HUMPHREYS

Mailing Address 1347 LAMAR SQUARE DR. APT. 201

City State Zip Code
AUSTIN TX 78704-2242

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation SALES CLERK

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt: 11 / 18 / 2010
Transaction ID: SA11.13971257
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. DIANE S. HUMPHREY

Mailing Address 2279 E. 250 N.

City State Zip Code
BLUFFTON IN 46714-9206

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 11 / 17 / 2010
Transaction ID: SA11.13969876
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 200.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1055 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. THOMAS N. HUND

Mailing Address 2300 CEDAR ELM TER

City WESTLAKE State TX Zip Code 76262-9030

FEC ID number of contributing federal political committee. **C**

Name of Employer B N S F CORP. Occupation EXECUTIVE V. P. & C F O

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13945624
Amount of Each Receipt this Period 5000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. TERRY L. HUNGERFORD

Mailing Address 107 BRAHM LOOP

City LA GRANGE State TX Zip Code 78945-5214

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13947611
Amount of Each Receipt this Period 50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. LLOYD R. HUNSAKER

Mailing Address 293 W. 500 S.

City LOGAN State UT Zip Code 84321-5222

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 25 / 2010
Transaction ID: SA11.13951708
Amount of Each Receipt this Period 20.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 5070.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1056 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. LLOYD R. HUNSAKER		Date of Receipt	
	Mailing Address 293 W. 500 S.		M M / D D / Y Y Y Y 11 / 19 / 2010	
	City	State	Zip Code	Transaction ID: SA11.13971995
	LOGAN	UT	84321-5222	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		C	20.00	
Name of Employer RETIRED		Occupation RETIRED	CONTRIBUTION	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	350.00	

B.	Full Name (Last, First, Middle Initial) MR. DOUGLAS H. HUNT		Date of Receipt	
	Mailing Address 4201 WINDSOR PARKWAY		M M / D D / Y Y Y Y 10 / 15 / 2010	
	City	State	Zip Code	Transaction ID: SA11.13932337
	DALLAS	TX	75205-1644	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		C	10000.00	
Name of Employer PETRO-HUNT, LLC		Occupation DIRECTOR OF ACQUISITIONS	CONTRIBUTION	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	10000.00	

C.	Full Name (Last, First, Middle Initial) MR. EARL E. HUNT		Date of Receipt	
	Mailing Address 3316 KENDALE AVE NW		M M / D D / Y Y Y Y 11 / 02 / 2010	
	City	State	Zip Code	Transaction ID: SA11.13962726
	CONCORD	NC	28027-9656	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		C	125.00	
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	235.00	

SUBTOTAL of Receipts This Page (optional)	▶	10145.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1057 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. GAYLE G. HUNT

Mailing Address PO BOX 12220

City

EL PASO

State

TX

Zip Code

79913-0220

FEC ID number of contributing federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13951151

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. HARRY H. HUNT, III

Mailing Address 800 HETHWOOD BLVD

City

BLACKSBURG

State

VA

Zip Code

24060-4207

FEC ID number of contributing federal political committee.

C

Name of Employer
H H HUNT

Occupation
CHAIRMAN / REAL ESTATE

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13932475

Amount of Each Receipt this Period

165.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

WOODROW HUNT

Mailing Address 7955 VIA CAPRI

City

LA JOLLA

State

CA

Zip Code

92037-4042

FEC ID number of contributing federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13948923

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5265.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1058 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. WOODY HUNT	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address PO BOX 12220	Transaction ID: SA11.13951149
	City State Zip Code EL PASO TX 79913-0220	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer: HUNT BUILDING CORPORATION Occupation: DEVELOPER/CONTRACTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	

B.	Full Name (Last, First, Middle Initial) MRS. CLARICE HUNTER	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 423 HALSEY ST FLOOR 1	Transaction ID: SA11.13930319
	City State Zip Code BROOKLYN NY 11233-1014	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer: HUNTER ARTS & CRAFTS Occupation: CLERK Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 475.00	

C.	Full Name (Last, First, Middle Initial) MRS. CLARICE HUNTER	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 423 HALSEY ST FLOOR 1	Transaction ID: SA11.13944539
	City State Zip Code BROOKLYN NY 11233-1014	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer: HUNTER ARTS & CRAFTS Occupation: CLERK Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 475.00	

SUBTOTAL of Receipts This Page (optional)	5075.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1059 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. DONA J. HUNTER

Mailing Address 739 S 13TH. ST.

City State Zip Code
WORLAND WY 82401-4013

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 280.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955230

Amount of Each Receipt this Period

40.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. EMELINE T. HUNTER

Mailing Address 224 E LINDEN AVE

City State Zip Code
HADDON TWP NJ 08108-1837

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 401.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948558

Amount of Each Receipt this Period

101.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. EMELINE T. HUNTER

Mailing Address 224 E LINDEN AVE

City State Zip Code
HADDON TWP NJ 08108-1837

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 401.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950445

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

341.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1060 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
H. J. HUNTER

Mailing Address 744 SIERRA MADRE BLVD

City State Zip Code
SAN MARINO CA 91108-1438

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1226.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952845

Amount of Each Receipt this Period
225.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JAMES S. HUNTER

Mailing Address 19330 BEAUFAIN ST

City State Zip Code
CORNELIUS NC 28031-5531

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 580.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929073

Amount of Each Receipt this Period
170.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
JERRY HUNTER

Mailing Address 245 UNION BOULEVARD

City State Zip Code
ST. LOUIS MO 63108

FEC ID number of contributing federal political committee. **C**

Name of Employer BRYAN CAVE LLP Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918860

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **895.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1061 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JOHN E. HUNTER

Mailing Address 8802 ARAGON LN

City State Zip Code
KNOXVILLE TN 37923-5828

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931742

Amount of Each Receipt this Period
35.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. HOMER B. HUPF

Mailing Address 3543 ALABAMA HWY SW

City State Zip Code
ROME GA 30165-7913

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
221.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932522

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CRAIG HURLBERT

Mailing Address 14 FARINGTON WAY

City State Zip Code
SPRING TX 77382-2651

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957934

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1060.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1062 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. FRANCIS HURLEY

Mailing Address **113 CHARLESBERRY LANE**

City **CHAPEL HILL** State **NC** Zip Code **27517-7903**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **10 / 18 / 2010**

Transaction ID: SA11.13935716

Amount of Each Receipt this Period **50.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. JANET C. HUSAT

Mailing Address **434 BAYWOOD PLACE**

City **COLUMBUS** State **OH** Zip Code **43230-2004**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FRANKLIN WOOD FACILITY** Occupation **REGISTERED NURSE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **11 / 02 / 2010**

Transaction ID: SA11.13962651

Amount of Each Receipt this Period **25.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. ETHEL HUSER

Mailing Address **1704 DECATUR RD**

City **FREDONIA** State **KS** Zip Code **66736-7328**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt **10 / 28 / 2010**

Transaction ID: SA11.13960055

Amount of Each Receipt this Period **90.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **165.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1063 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOHN W. HUSHEN

Mailing Address 2212 RYAN BLVD.

City State Zip Code
PUNTA GORDA FL 33950-8173

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 490.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941043

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN W. HUSHEN

Mailing Address 2212 RYAN BLVD.

City State Zip Code
PUNTA GORDA FL 33950-8173

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 490.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949125

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. KARMA J. HUSTON

Mailing Address P.O. BOX 250424

City State Zip Code
W BLOOMFIELD MI 48325-0424

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FIRST UNITED METHODIST CH-URCH PASTORAL CAREGIVER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 299.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954476

Amount of Each Receipt this Period
35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **185.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1064 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. HENRY M. HUTCHESON

Mailing Address 115 S HAWK DR

City State Zip Code
RAINBOW CITY AL 35906-3609

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PHARMACIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2601.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954477

Amount of Each Receipt this Period
300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. RICHARD L. HUTCHESON

Mailing Address 4311 SHADOW OAK LAKE RD

City State Zip Code
AUSTIN TX 78746

FEC ID number of contributing federal political committee. **C**

Name of Employer HEROES & LEGACIES Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951592

Amount of Each Receipt this Period
750.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JOHNNY H. HUTTO, SR.

Mailing Address 221 MEADOWLINKS DRIVE

City State Zip Code
FORT GAINES GA 39851-2605

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 7 / 2 0 1 0

Transaction ID: SA11.13969882

Amount of Each Receipt this Period
60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1110.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1065 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DONNA HUTTS	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 16011 CASTLETOWN PARK CT.	Transaction ID: SA11.13977023
	City State Zip Code SPRING TX 77379-7670	Amount of Each Receipt this Period -1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 100.00	CHECK RETURNED BY BANK

B.	Full Name (Last, First, Middle Initial) MS. VALERIE J. HUYETT	Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address 120 PHEASANT RUN	Transaction ID: SA11.13963183
	City State Zip Code YORK HAVEN PA 17370-9594	Amount of Each Receipt this Period 105.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00	

C.	Full Name (Last, First, Middle Initial) REV. TZUYANG YANG HWANG, PH D	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 11768 ROSEGLEN STREET	Transaction ID: SA11.13956739
	City State Zip Code EL MONTE CA 91732-1446	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer AMERICAN CHICHOU THEO INST Occupation PROFESSOR/PRESIDENT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 280.00	

SUBTOTAL of Receipts This Page (optional)	-870.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1066 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) LAURISSA W. HYATT	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 4421 SOMERSET ST	Transaction ID: SA11.13945410
	City State Zip Code LAKE CHARLES LA 70605-3933	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) MS. PATRICIA HYDE	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 3044 HARLEM AVE	Transaction ID: SA11.13936312
	City State Zip Code RIVERSIDE IL 60546-1710	Amount of Each Receipt this Period 520.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1040.00	

C.	Full Name (Last, First, Middle Initial) MR. DAVID IBBETSON	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 1275 70TH RD	Transaction ID: SA11.13918451
	City State Zip Code YATES CENTER KS 66783-5154	Amount of Each Receipt this Period 110.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation IBBETSON BROTHERS OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 335.00	

SUBTOTAL of Receipts This Page (optional)	655.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1067 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CARL R. ICE

Mailing Address 2206 CEDAR ELM TER

City State Zip Code
WESTLAKE TX 76262-9027

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BNSF RAILWAY COMPANY EVP & COO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961227

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. CORNELIA IKENS

Mailing Address 2 CROSS DR.

City State Zip Code
WATERFORD CT 06385-2710

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958620

Amount of Each Receipt this Period
110.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. TARA IMANI

Mailing Address 916 HICKORY HOLLOW ST

City State Zip Code
HOUSTON TX 77024-3245

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TARA IMANI DESIGNS, LLC ARCHITECT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955829

Amount of Each Receipt this Period
55.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **5165.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1068 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
HELENE IMBER

Mailing Address 36 AUGUSTA DR.

City	State	Zip Code
CORTLANDT MNR	NY	10567-3119

FEC ID number of contributing federal political committee. **C**

Name of Employer IRVINGTON UFSD	Occupation TEACHER
------------------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940670

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. PAUL H. IMMKE

Mailing Address 14229 N 3000 EAST RD

City	State	Zip Code
SAUNEMIN	IL	61769-6085

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918542

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. PAULINE INABNITT

Mailing Address 926 CAMBRIDGE DR

City	State	Zip Code
MASON	OH	45040-1007

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 561.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935204

Amount of Each Receipt this Period

60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

210.00

TOTAL This Period (last page this line number only) ▶

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1069 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DR. DONALD L. INGALLS

Mailing Address 385 LAWSON RD

City State Zip Code
MATHEWS AL 36052-4013

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED DENTIST

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 770.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952293

Amount of Each Receipt this Period

220.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. RODNEY H. INGRAHAM

Mailing Address 420 N ALMANSOR ST

City State Zip Code
ALHAMBRA CA 91801-2623

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 302.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934964

Amount of Each Receipt this Period

2.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
JEFFREY C. INGRUM

Mailing Address 1207 ALYDAR DR

City State Zip Code
MAHOMET IL 61853-3732

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HEALTH ALLIANCE MEDICAL PLANS PRESIDENT AND CEO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 1 0

Transaction ID: SA11.13928678

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

322.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1070 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. PATRICIA K. INMAN

Mailing Address 1821 PLUMBAGO WAY

City State Zip Code
NAPLES FL 34105-3061

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13928548

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. MARSAVELA IONEL

Mailing Address P.O. BOX 1548

City State Zip Code
LOMA LINDA CA 92354-1548

FEC ID number of contributing federal political committee. **C**

Name of Employer
C & M TRANSPORT

Occupation

TRUCK DRIVER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
396.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936813

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. MARSAVELA IONEL

Mailing Address P.O. BOX 1548

City State Zip Code
LOMA LINDA CA 92354-1548

FEC ID number of contributing federal political committee. **C**

Name of Employer
C & M TRANSPORT

Occupation

TRUCK DRIVER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
396.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949630

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

225.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1071 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JACK C. IRELAND
Mailing Address 25711 E 19TH ST
City CATOOSA State OK Zip Code 74015-4568
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 341.00
Date of Receipt 10 / 25 / 2010
Transaction ID: SA11.13951846
Amount of Each Receipt this Period 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. SHERYL IRELAND
Mailing Address 13368 LAKE SHORE DR
City CLIVE State IA Zip Code 50325-8740
FEC ID number of contributing federal political committee. **C**
Name of Employer CAPITAL SANITARY SUPPLY Occupation PRESIDENT
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 310.00
Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13950565
Amount of Each Receipt this Period 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. BETTY K. ISBELL
Mailing Address 1888 EMERALD BAY DR
City ROCKWALL State TX Zip Code 75087-3283
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 311.00
Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13939497
Amount of Each Receipt this Period 11.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 211.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1072 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. BETTY S. ISLEY	Date of Receipt MM / DD / YYYY 11 / 19 / 2010
	Mailing Address 1276 KENNEDY FARM RD N	Transaction ID: SA11.13970060
	City State Zip Code THOMASVILLE NC 27360-8333	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

B.	Full Name (Last, First, Middle Initial) DR. CASEY J. IVERSON	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 3604 S BLAINE STREET LOT 4	Transaction ID: SA11.13946199
	City State Zip Code GRAND ISLAND NE 68801-8819	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation CHIROPRACTER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

C.	Full Name (Last, First, Middle Initial) MR. MARC IVERSON	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 6037 SHARON ROAD	Transaction ID: SA11.13938782
	City State Zip Code CHARLOTTE NC 28210-6827	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	1175.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1073 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES BRUCE IVIE

Mailing Address 3176 CRESTVIEW CIRCLE

City State Zip Code
BOUNTIFUL UT 84010-8217

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DAVIS COUNTY REAL ESTATE APPRAISER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 227.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933315

Amount of Each Receipt this Period
51.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. SAM U. IWU

Mailing Address 421 DECATUR STREET, NW

City State Zip Code
WASHINGTON DC 20011-4744

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NEXOSAM SERVICES LLC CONSULTANT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13966032

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. STEPHEN IZZI

Mailing Address 3226 PARLIAMENT PL

City State Zip Code
WEST FRIENDSHIP MD 21794-9200

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 310.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945587

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1151.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1074 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MISS JENIVIE L. JACK

Mailing Address 8544 SOUTHPORT DR.

City State Zip Code
EVANSVILLE IN 47711-6344

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1858.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13931211

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MISS JENIVIE L. JACK

Mailing Address 8544 SOUTHPORT DR.

City State Zip Code
EVANSVILLE IN 47711-6344

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1858.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940693

Amount of Each Receipt this Period

240.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MISS JENIVIE L. JACK

Mailing Address 8544 SOUTHPORT DR.

City State Zip Code
EVANSVILLE IN 47711-6344

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1858.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13964741

Amount of Each Receipt this Period

101.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

441.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1075 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MISS ELIZABETH JACKSON	Date of Receipt MM / DD / YYYY 11 / 09 / 2010
	Mailing Address 724 CLAYTON CORNERS DR.	Transaction ID: SA11.13966568
	City State Zip Code BALLWIN MO 63011-2839	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 813.00	

B.	Full Name (Last, First, Middle Initial) MISS EUNICE JACKSON	Date of Receipt MM / DD / YYYY 11 / 02 / 2010
	Mailing Address 4073 FOREST RIDGE BLVD	Transaction ID: SA11.13964789
	City State Zip Code DAYTON OH 45424-4834	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 365.00	

C.	Full Name (Last, First, Middle Initial) NANCY W. JACKSON	Date of Receipt MM / DD / YYYY 10 / 23 / 2010
	Mailing Address 1128 FRENCH TOWN LN.	Transaction ID: SA11.13947665
	City State Zip Code FRANKLIN TN 37067-4666	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	190.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1076 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. PAT P. JACKSON		Date of Receipt
	Mailing Address 214 S ROOSEVELT ST.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 10 / 20 / 2010
	City	State	Zip Code
	MARION	KS	66861-1352
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13944509
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 100.00
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MR. PAUL E. JACKSON		Date of Receipt
	Mailing Address 917 MARINA DR.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 10 / 18 / 2010
	City	State	Zip Code
	P C BEACH	FL	32407-5523
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13935277
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1.00
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) DR. RICHARD JACKSON, M.D.		Date of Receipt
	Mailing Address 8230 WALNUT HILL LANE #220		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 10 / 27 / 2010
	City	State	Zip Code
	DALLAS	TX	75231-4425
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13955980
Name of Employer DALLAS NEUROSURGICAL		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1000.00
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1101.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1077 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. ROSALIE C. JACKSON

Mailing Address 4440 RUE SAINT PETER

City State Zip Code
KENNER LA 70065-1139

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959048

Amount of Each Receipt this Period
110.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WR JACKSON

Mailing Address 55 BURBANK LANE

City State Zip Code
YARMOUTH ME 04096-5927

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950434

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CHARLES JACOBS

Mailing Address 401 9TH STREET N.W.
SUITE 900

City State Zip Code
WASHINGTON DC 20004-2145

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NIXON PEABODY ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 0 / 2 0 1 0

Transaction ID: SA11.13968710

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1110.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1078 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. EDWARD T. JACOBSON

Mailing Address 5003 PELICAN BLVD

City State Zip Code
CAPE CORAL FL 33914-6526

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 1 0

Transaction ID: SA11.13970953

Amount of Each Receipt this Period

80.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. EMMETT R. JACOB

Mailing Address 11381 THRAILKILL RD

City State Zip Code
ORIENT OH 43146-9731

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 445.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940650

Amount of Each Receipt this Period

30.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. EMMETT R. JACOB

Mailing Address 11381 THRAILKILL RD

City State Zip Code
ORIENT OH 43146-9731

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 445.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954231

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1079 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. KAREN S. JACOBSON		Date of Receipt
	Mailing Address 3308 WITMARSUM DRIVE		<input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	NORTH NEWTON	KS	67117-8052
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13918724
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="240.00"/>	<input type="text" value="65.00"/>
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) LEONARD JACOB		Date of Receipt
	Mailing Address 35 GREAT HILL RD.		<input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	KENNEBUNK	ME	04043-7402
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13945957
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	<input type="text" value="150.00"/>
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MR. LYLE L. JACOBSON		Date of Receipt
	Mailing Address 257 W UTAH AVE		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	TOOELE	UT	84074-1501
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13934165
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="215.00"/>	<input type="text" value="20.00"/>
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="235.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1080 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. LYLE L. JACOBSON

Mailing Address **257 W UTAH AVE**

City **TOOELE** State **UT** Zip Code **84074-1501**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **215.00**

Date of Receipt **11 / 15 / 2010**

Transaction ID: SA11.13968860

Amount of Each Receipt this Period **25.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. NORMAN A. JACOBS

Mailing Address **P.O. BOX 5462**

City **CAREFREE** State **AZ** Zip Code **85377-5462**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **701.00**

Date of Receipt **10 / 18 / 2010**

Transaction ID: SA11.13933328

Amount of Each Receipt this Period **201.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MURRAY JAEGER

Mailing Address **32007 INDUSTRIAL PARK DR**

City **PINEHURST** State **TX** Zip Code **77362-3894**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TURN-TECH INC.** Occupation **PRESIDENT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1250.00**

Date of Receipt **10 / 15 / 2010**

Transaction ID: SA11.13928011

Amount of Each Receipt this Period **250.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **476.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1081 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
KURT R. JAGGERS

Mailing Address 2 BLUE OAKS COURT

City State Zip Code
PORTOLA VALLEY CA 94028-8075

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TA ASSOCIATES INVESTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13951147

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ANDREW L. JAGODA, ESQ.

Mailing Address 14 PARADISE DRIVE

City State Zip Code
SCARSDALE NY 10583-1522

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
KATTEN MUCHIN ROSENMAN LLP ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 1 0

Transaction ID: SA11.13928807

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ANDREW L. JAGODA, ESQ.

Mailing Address 14 PARADISE DRIVE

City State Zip Code
SCARSDALE NY 10583-1522

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
KATTEN MUCHIN ROSENMAN LLP ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951597

Amount of Each Receipt this Period
110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **5210.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1082 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. LOREN A. JAHN

Mailing Address 13149 N COUNTRY CLUB CT

City State Zip Code
PALOS HEIGHTS IL 60463-2727

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956785

Amount of Each Receipt this Period

160.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. EILEEN EILEEN JAILLET

Mailing Address 11545 SW BEEF BEND RD. APT. 77

City State Zip Code
PORTLAND OR 97224-2768

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946097

Amount of Each Receipt this Period

1.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. EILEEN EILEEN JAILLET

Mailing Address 11545 SW BEEF BEND RD. APT. 77

City State Zip Code
PORTLAND OR 97224-2768

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958926

Amount of Each Receipt this Period

40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

201.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1083 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROLAND A. JALBERT

Mailing Address 527 ROVER BLVD

City State Zip Code
LOS ALAMOS NM 87544-3540

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 335.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13946911

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GEORGE JAMES

Mailing Address 451 GUARDS ROAD

City State Zip Code
GREENWICH CT 06831-2666

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MORGAN STANLEY BANKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13951808

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN JAMESON

Mailing Address 300 WATERS DR. APT. B311

City State Zip Code
SOUTHERN PINES NC 28387-2269

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13947517

Amount of Each Receipt this Period
85.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

385.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1084 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOHN N. JAMESON

Mailing Address PO BOX 453

City PLAISTOW State NH Zip Code 03865-0453

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation INVESTMENT ADVISOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13951478
Amount of Each Receipt this Period: 75.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN H. JAMIESON

Mailing Address P.O. BOX 947

City LARKSPUR State CA Zip Code 94977-0947

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13934084
Amount of Each Receipt this Period: 30.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN H. JAMIESON

Mailing Address P.O. BOX 947

City LARKSPUR State CA Zip Code 94977-0947

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13945757
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 130.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1085 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOHN H. JAMIESON
Mailing Address P.O. BOX 947

City State Zip Code
LARKSPUR CA 94977-0947

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 245.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0
Transaction ID: SA11.13949341
Amount of Each Receipt this Period
25.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN H. JAMIESON
Mailing Address P.O. BOX 947

City State Zip Code
LARKSPUR CA 94977-0947

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 245.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 1 0
Transaction ID: SA11.13971986
Amount of Each Receipt this Period
75.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WILLIAM JAMIESON
Mailing Address 281 ROSEMONT DR.

City State Zip Code
DURHAM NC 27713-7595

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0
Transaction ID: SA11.13945361
Amount of Each Receipt this Period
40.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 140.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 1086 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
WALTER H. JAMISON

Mailing Address 949 HIGHLAND RD.

City State Zip Code
NEWTOWN PA 18940-2921

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13937300

Amount of Each Receipt this Period
35.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CARL JANO

Mailing Address 72 GAYNOR AVE

City State Zip Code
MANHASSET NY 11030-1916

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13952223

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MARK S. JANSEN

Mailing Address 6530 RIDGE ROAD

City State Zip Code
PARKVILLE MO 64152-3133

FEC ID number of contributing federal political committee. **C**

Name of Employer CLASSIC PARTS
Occupation SELF-EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	1	0

Transaction ID: SA11.13938424

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1075.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1087 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. RICK JANSEN, JR.	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 519 N MILWAUKEE AVE	Transaction ID: SA11.13938490
	City State Zip Code LIBERTYVILLE IL 60048-2018	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation TAVERN IN THE TOWN LTD. MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) MR. ALAN JANSSEN	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 107 W JEFFERSON ST	Transaction ID: SA11.13951604
	City State Zip Code BLOOMFIELD IA 52537-1617	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation JF COMPANY OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) MR. RAYMOND J. JARAMILLO	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 6431 MONTEREY RD APT 3 APT 3	Transaction ID: SA11.13953891
	City State Zip Code LOS ANGELES CA 90042-4361	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 233.00	

SUBTOTAL of Receipts This Page (optional)	▶	1130.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1088 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. KENNETH J. JARCHO

Mailing Address 9976 OLD WAGON TRL.

City State Zip Code
EDEN PRAIRIE MN 55347-4548

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation INSURANCE SALES

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 881.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943913

Amount of Each Receipt this Period
101.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. KENNETH J. JARCHO

Mailing Address 9976 OLD WAGON TRL.

City State Zip Code
EDEN PRAIRIE MN 55347-4548

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation INSURANCE SALES

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 881.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954106

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. GLENN JARRETT

Mailing Address 660 BIG FLAT RD

City State Zip Code
MISSOULA MT 59804-9210

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 1 0

Transaction ID: SA11.13966881

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **251.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1089 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DUANE JARVIS	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 780 HARRINGTON WAY APT 203	Transaction ID: SA11.13956650
	City State Zip Code FOLSOM CA 95630-3461	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) GARY JASON	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 875 AVIENDA ACAPULCO	Transaction ID: SA11.13930532
	City State Zip Code SAN CLEMENTE CA 92672	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) MR. SCOTT JAVINS	Date of Receipt MM / DD / YYYY 11 / 10 / 2010
	Mailing Address 1905 DON AVE	Transaction ID: SA11.13967627
	City State Zip Code WESTMINSTER MD 21157-7347	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

SUBTOTAL of Receipts This Page (optional)	▶	265.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DAVID JEALOUS

Mailing Address 232 BLAKE HILL -T

City State Zip Code
WOODSTOCK VT 05091-9761

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961826

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. GENE D. JEFFERSON

Mailing Address 5064 APPALOOSA CT

City State Zip Code
PLAINFIELD IN 46168-8468

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS MINISTER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952412

Amount of Each Receipt this Period
65.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. PHYLLIS J. JEFFERS

Mailing Address 37 PAYNE RIVER CIRCLE

City State Zip Code
SACRAMENTO CA 95831-3308

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 211.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931578

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

215.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1091 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. PHYLLIS J. JEFFERS

Mailing Address 37 PAYNE RIVER CIRCLE

City State Zip Code
SACRAMENTO CA 95831-3308

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 211.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 18 / 2010

Transaction ID: SA11.13932942

Amount of Each Receipt this Period
51.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. TERRY J. JEFFRIES

Mailing Address 409 SW 24TH ST

City State Zip Code
SEMINOLE TX 79360-3800

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 19 / 2010

Transaction ID: SA11.13931887

Amount of Each Receipt this Period
105.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL JELENIEWSKI

Mailing Address 14051 BARBARA STREET

City State Zip Code
LIVONIA MI 48154-5329

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 14 / 2010

Transaction ID: SA11.13918571

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **181.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
RAYMOND E. JEMISON

Mailing Address 230 SUNNYSIDE RD

City State Zip Code
NORWOOD MA 02062-4750

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
212.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930732

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
RAYMOND E. JEMISON

Mailing Address 230 SUNNYSIDE RD

City State Zip Code
NORWOOD MA 02062-4750

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
212.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944520

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ROBERT R. JENNINGS

Mailing Address 18419 JOVAN ST

City State Zip Code
TARZANA CA 91335-7044

FEC ID number of contributing federal political committee. **C**

Name of Employer MERCURY MESSENGER SVC

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

MESSENGER

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940575

Amount of Each Receipt this Period

35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

85.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1093 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. THOMAS JENNINGS

Mailing Address 120 NATHANAELS CROSSING DR

City State Zip Code
COLUMBIA TN 38401-5200

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REDMAN-DAVIS INSURANCE INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937196

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CARL P. JENSEN

Mailing Address 504 N SHAMROCK RD.

City State Zip Code
BEL AIR MD 21014-3348

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937275

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. HELEN JENSEN

Mailing Address 1525 JENSEN AVE

City State Zip Code
SANGER CA 93657-2819

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931558

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 400.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1094 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOHN H. JENSEN

Mailing Address P.O. BOX 1152

City State Zip Code
BEVERLY HILLS CA 90213-1152

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt
MM / DD / YYYY
11 / 15 / 2010

Transaction ID: SA11.13968849

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MARGENE HILTON JENSEN

Mailing Address 10318 GOLDEN OAK LN.

City State Zip Code
HIGHLAND UT 84003-9440

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13939266

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. NOBY R. JENSEN

Mailing Address 497 OLD CHARLES TOWN RD.

City State Zip Code
STEPHENSON VA 22656-1726

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 247.00

Date of Receipt
MM / DD / YYYY
11 / 22 / 2010

Transaction ID: SA11.13971740

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 165.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 1095 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. ROBERT H. JENSEN

Mailing Address 1598 LANCASTER ST

City State Zip Code
PRESCOTT AZ 86301-6530

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930220

Amount of Each Receipt this Period
101.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAVID K. JEPSEN

Mailing Address 295 BOEING CT

City State Zip Code
LIVERMORE CA 94551-9258

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959039

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL J. JESULAITIS

Mailing Address 13701 GREENFIELD WAY
APARTMENT 105

City State Zip Code
SOUTHGATE MI 48195-3418

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 317.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929328

Amount of Each Receipt this Period
70.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 671.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. MARY C. JETT

Mailing Address 201 RUFFIAN CT

City State Zip Code
FRANKFORT KY 40601-5366

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13948014

Amount of Each Receipt this Period
30.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BILLY JEWELL

Mailing Address 4206 19TH ST

City State Zip Code
LUBBOCK TX 79407-2405

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CONVACAREINC. CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 470.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942536

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LUCILLE JEWETT

Mailing Address 2990 BROADWAY ST.

City State Zip Code
SAN FRANCISCO CA 94115-1062

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954025

Amount of Each Receipt this Period
400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **530.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1097 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. HUBIN JIANG

Mailing Address 10359 CAROL STREET

City State Zip Code
GREAT FALLS VA 22066-2910

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13948192

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. EDWARD JIRELE

Mailing Address P.O. BOX 802047

City State Zip Code
SANTA CLARITA CA 91380-2047

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13963179

Amount of Each Receipt this Period
110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
JERRY D. JOBE

Mailing Address 1610 HEATHER LN

City State Zip Code
DARIEN IL 60561-5326

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt
MM / DD / YYYY
10 / 14 / 2010

Transaction ID: SA11.13918741

Amount of Each Receipt this Period
90.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1200.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1098 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DONALD EVERETT JOCELYN

Mailing Address 139 N BELMONT ST APT O

City State Zip Code
GLENDALE CA 91206-4910

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RALPH'S GROCERY STORE DEPARTMENT HEAD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 355.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13962095

Amount of Each Receipt this Period
55.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WALTER D. JOHANN

Mailing Address 3510 FORESTOAK CT

City State Zip Code
CINCINNATI OH 45208-1808

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935733

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. ANN JOHNSON

Mailing Address 102 SHORELAKE DR APT D

City State Zip Code
GREENSBORO NC 27455-1474

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 431.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933305

Amount of Each Receipt this Period
51.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 206.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1099 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. BASIL CHARLES JOHNSON

Mailing Address 20 E PAMELA RD.

City State Zip Code
ARCADIA CA 91006-4064

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 376.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13932597

Amount of Each Receipt this Period
36.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BASIL CHARLES JOHNSON

Mailing Address 20 E PAMELA RD.

City State Zip Code
ARCADIA CA 91006-4064

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 376.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13937209

Amount of Each Receipt this Period
90.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. BEN JOHNSON, III

Mailing Address P.O. BOX 632
1014 POLK STREET

City State Zip Code
MANSFIELD LA 71052-0632

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED OIL & GAS PRODUCTION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 8125.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2010

Transaction ID: SA11.13932340

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **2126.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1100 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. BONNIE JOHNSON

Mailing Address 351 KLONDIKE DR

City State Zip Code
WARM SPRINGS VA 24484-2264

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 18 / 2010

Transaction ID: SA11.13937781

Amount of Each Receipt this Period
60.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. BONNIE JOHNSON

Mailing Address 351 KLONDIKE DR

City State Zip Code
WARM SPRINGS VA 24484-2264

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 27 / 2010

Transaction ID: SA11.13958898

Amount of Each Receipt this Period
30.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. BRADLEY C. JOHNS

Mailing Address 5935 N. CAMINO DEL CONDE

City State Zip Code
TUCSON AZ 85718-4311

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
545.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2010

Transaction ID: SA11.13938510

Amount of Each Receipt this Period
75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **165.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1101 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
CRAIG L. JOHNSON

Mailing Address 38794 N OAKCREST LN.

City WADSWORTH State IL Zip Code 60083-9556

FEC ID number of contributing federal political committee. **C**

Name of Employer ZERO AIR INC Occupation DIRECTOR OF AVIATION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 20 / 2010

Transaction ID: SA11.13944331

Amount of Each Receipt this Period 100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DEBORAH N. JOHNSON

Mailing Address P.O. BOX 1285

City ASPEN State CO Zip Code 81612-1285

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 29 / 2010

Transaction ID: SA11.13959360

Amount of Each Receipt this Period 100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. DOROTHY JOHNSON

Mailing Address 7304 MARIPOSA DR.

City MANASSAS State VA Zip Code 20112-3614

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 10 / 14 / 2010

Transaction ID: SA11.13928560

Amount of Each Receipt this Period 30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 230.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1102 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. DOROTHY JOHNSON

Mailing Address 7304 MARIPOSA DR.

City MANASSAS State VA Zip Code 20112-3614

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13942445
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
E. JOHNSON

Mailing Address 527 KEN MILLER RD.

City RUTHERFORDTON State NC Zip Code 28139-6811

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 901.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13949954
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ELEANOR JOHNSON

Mailing Address 63 VILLAGE ST

City MARBLEHEAD State MA Zip Code 01945-2233

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13941463
Amount of Each Receipt this Period: 71.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 271.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1103 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. FREDERICK W. JOHNSON

Mailing Address 70 MAPLE AVENUE

City State Zip Code
LEOMINSTER MA 01453-2106

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13942241

Amount of Each Receipt this Period

10.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. FREDERICK W. JOHNSON

Mailing Address 70 MAPLE AVENUE

City State Zip Code
LEOMINSTER MA 01453-2106

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13971696

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. GERALD C. JOHNSON

Mailing Address 50 TALLWOOD CT

City State Zip Code
ATHERTON CA 94027-6432

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
J CYRIL JOHNSON INV. CORP. REAL ESTATE DEVELOPER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 251.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935439

Amount of Each Receipt this Period

1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

36.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1104 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
GLORIA R. JOHNSON

Mailing Address 2317 DUPONT AVE

City State Zip Code
SUITLAND MD 20746-1023

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1140.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936154

Amount of Each Receipt this Period
60.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GLORIA R. JOHNSON

Mailing Address 2317 DUPONT AVE

City State Zip Code
SUITLAND MD 20746-1023

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1140.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937254

Amount of Each Receipt this Period
30.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GLORIA R. JOHNSON

Mailing Address 2317 DUPONT AVE

City State Zip Code
SUITLAND MD 20746-1023

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1140.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949193

Amount of Each Receipt this Period
90.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 180.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1105 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
GLORIA R. JOHNSON
Mailing Address 2317 DUPONT AVE
City SUITLAND State MD Zip Code 20746-1023
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1140.00
Date of Receipt 11 / 01 / 2010
Transaction ID: SA11.13963022
Amount of Each Receipt this Period 90.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GLORIA R. JOHNSON
Mailing Address 2317 DUPONT AVE
City SUITLAND State MD Zip Code 20746-1023
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1140.00
Date of Receipt 11 / 01 / 2010
Transaction ID: SA11.13963052
Amount of Each Receipt this Period 150.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GRANT W. JOHNSON
Mailing Address 2118 WYNKOOP DR.
City COLORADO SPRINGS State CO Zip Code 80909-1445
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13940331
Amount of Each Receipt this Period 40.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 280.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1106 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
HUNTER JOHNSON, JR.
Mailing Address 5633 RIVIERA AVE
City BANNING State CA Zip Code 92220-5343
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.50
Date of Receipt 10 / 28 / 2010
Transaction ID: SA11.13959789
Amount of Each Receipt this Period 20.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. JACKIE H. JOHNSON
Mailing Address 5233 LA CANADA BLVD.
City LA CANADA FLINTRID State CA Zip Code 91011-1719
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00
Date of Receipt 11 / 04 / 2010
Transaction ID: SA11.13965759
Amount of Each Receipt this Period 40.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. JEAN W. JOHNSON
Mailing Address 4555 35TH AVENUE APT 110
City MERIDIAN State MS Zip Code 39305-2513
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00
Date of Receipt 10 / 15 / 2010
Transaction ID: SA11.13928329
Amount of Each Receipt this Period 30.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 90.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1107 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JERRY JOHNSON

Mailing Address 10730 MCCREIGHT ST

City State Zip Code
BASTROP LA 71220-2475

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
306.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954143

Amount of Each Receipt this Period
30.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
JOANNE JOHNSON

Mailing Address P.O. BOX 66

City State Zip Code
RIDDLE OR 97469-0066

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946193

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. JOANNE T. JOHNSON

Mailing Address 70 ROBLEY RD

City State Zip Code
SALINAS CA 93908-8900

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931520

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

1230.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1108 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. KARIN ANN JOHNSON		Date of Receipt
	Mailing Address 1623 EAST 32ND PLACE		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	TULSA	OK	74105-2127
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13957920
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="250.00"/>
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) MISS KATHRYN H. JOHNSTON		Date of Receipt
	Mailing Address 139 HORTON		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	KYLE	TX	78640-4304
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer RETIRED		Occupation RETIRED	Transaction ID: SA11.13960717
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="210.00"/>	<input type="text" value="160.00"/>
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) MR. KENNETH JOHNSON		Date of Receipt
	Mailing Address 2674 JOCKEYS NECK TRL		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	WILLIAMSBURG	VA	23185-8056
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13947845
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="400.00"/>	<input type="text" value="200.00"/>
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="610.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1109 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. KRISTINA K. JOHNSON		Date of Receipt
	Mailing Address 16 WALNUT PL.		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	COVINGTON	LA	70433-5731
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer HOMEMAKER		Occupation HOMEMAKER	Transaction ID: SA11.13941798
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	Amount of Each Receipt this Period <input type="text" value="100.00"/>
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MR. LELAND E. JOHNSON		Date of Receipt
	Mailing Address 415 WALLS WAY		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	OSPREY	FL	34229-9068
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13961530
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="440.00"/>	Amount of Each Receipt this Period <input type="text" value="165.00"/>
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MR. LLOYD O. JOHNSON		Date of Receipt
	Mailing Address 7268 W CAMERO AVE		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	LAS VEGAS	NV	89113-4643
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13931695
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="260.00"/>	Amount of Each Receipt this Period <input type="text" value="110.00"/>
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="375.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1110 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. MALCOLM C. JOHNSON	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 112 SAWGRASS DR	Transaction ID: SA11.13938449
	City State Zip Code DOTHAN AL 36303-6804	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer EXPRESS SOUTH, LLC	Occupation SMALL BUSINESS OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) MRS. MARY JOHNSON	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 8596 GARDEN OF EDEN RD	Transaction ID: SA11.13941042
	City State Zip Code SEDRO WOOLLEY WA 98284-8751	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

C.	Full Name (Last, First, Middle Initial) MARK C. JOHNSON	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address P.O. BOX 933	Transaction ID: SA11.13946734
	City State Zip Code ROGUE RIVER OR 97537-0933	Amount of Each Receipt this Period 26.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 206.00	

SUBTOTAL of Receipts This Page (optional)	176.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1111 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. MARJORIE M. JOHNSON	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 4104 PROVIDENCE DR.	Transaction ID: SA11.13935088
	City State Zip Code SAINT CHARLES MO 63304-5547	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

B.	Full Name (Last, First, Middle Initial) MR. MICHAEL J. JOHNSON	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 5702 CLUB COURSE DR	Transaction ID: SA11.13935787
	City State Zip Code NORTH MYRTLE BEACH SC 29582-9448	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) MS. MIRIAM E. JOHNS	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 5 OVERHOLT DR	Transaction ID: SA11.13941512
	City State Zip Code DOYLESTOWN PA 18902-1166	Amount of Each Receipt this Period 41.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

SUBTOTAL of Receipts This Page (optional)	▶	691.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1112 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
NANCY JOHNSON

Mailing Address 6403 MEADE DR.

City State Zip Code
COLLEYVILLE TX 76034-5779

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ROGERS O'BRIEN CONSTRUTION ENGINEER
CO.

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943172

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. NANCY D. JOHNSON

Mailing Address 124 W. LA PINTURA

City State Zip Code
GREEN VALLEY AZ 85614-1927

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933362

Amount of Each Receipt this Period
51.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. PARKE B. JOHNSTON

Mailing Address 10200 HUMPHREY RD

City State Zip Code
CINCINNATI OH 45242-4624

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 880.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943720

Amount of Each Receipt this Period
300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 401.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1113 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. PARKE B. JOHNSTON

Mailing Address 10200 HUMPHREY RD

City State Zip Code
CINCINNATI OH 45242-4624

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 880.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13960460

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. PATSY L. JOHNSON

Mailing Address 2450 WATKINS LAKE RD

City State Zip Code
WATERFORD MI 48328

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 695.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938533

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PAUL E. JOHNSON

Mailing Address 309 WEST PINEHURST

City State Zip Code
DAKOTA DUNES SD 57049-5234

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MIDLANDS CLINIC, PC PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 1 0

Transaction ID: SA11.13947642

Amount of Each Receipt this Period
150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 240.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1114 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. PAUL S. JOHNSON

Mailing Address 880 MAONARCH PLACE

City State Zip Code
KERSHAW SC 29067-9766

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SBA NETWORK SERVICES INC. ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 303.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945571

Amount of Each Receipt this Period
39.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PHILIP B. JOHNSON

Mailing Address 7600 POISON SPIDER RD.

City State Zip Code
CASPER WY 82604-9522

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED RANCHER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958693

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. PHYLLIS A. JOHNSON

Mailing Address 5250 VILLA WAY
APARTMENT 228

City State Zip Code
EDINA MN 55436-2142

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928914

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **189.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1115 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. RACHEL PLUMMER JOHNSON		Date of Receipt
	Mailing Address 326 SCOTT AVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 8 / 2 0 1 0
	City	State	Zip Code
	PARIS	KY	40361-1953
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13936530
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 226.00	<input type="text"/> 1.00
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) RICHARD A. JOHNSON		Date of Receipt
	Mailing Address 15411 W93RD STREET		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 9 / 2 0 1 0
	City	State	Zip Code
	LENEXA	KS	66219
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13941459
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 201.00	<input type="text"/> 101.00
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MR. ROBERT JOHNSON		Date of Receipt
	Mailing Address 19595 GILBERTSONS HILL		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 0 / 2 0 1 0
	City	State	Zip Code
	MORA	MN	55051-6570
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13944380
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	<input type="text"/> 25.00
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 127.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1116 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT JOHNSON

Mailing Address 19595 GILBERTSONS HILL

City State Zip Code
MORA MN 55051-6570

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13945014

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT JOHNSON

Mailing Address 19595 GILBERTSONS HILL

City State Zip Code
MORA MN 55051-6570

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955530

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT JOHNSON

Mailing Address 19595 GILBERTSONS HILL

City State Zip Code
MORA MN 55051-6570

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13973196

Amount of Each Receipt this Period
15.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 65.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1117 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. ROBERT G. JOHNSON

Mailing Address 6450 ELLENWOOD AVE

City State Zip Code
SAINT LOUIS MO 63105-2229

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ST. LOUIS UNIVERSITY SURGEON

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1050.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 17 / 2010

Transaction ID: SA11.13928804

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT R. JOHNS

Mailing Address 304 AZALEA STREET

City State Zip Code
LAFAYETTE LA 70506-3506

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOSPITAL CORP OF AMERICA PHYSICIAN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 680.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 22 / 2010

Transaction ID: SA11.13949815

Amount of Each Receipt this Period
75.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROGER JOHNSON

Mailing Address 10494 MEADOW GLEN WAY E

City State Zip Code
ESCONDIDO CA 92026-6919

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 22 / 2010

Transaction ID: SA11.13945403

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 425.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1118 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. RONALD R. JOHNSON

Mailing Address 1823 S MAIN ST

City State Zip Code
WEATHERFORD TX 76086-5505

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MTMC SALES

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 301.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939026

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. RONALD R. JOHNSON

Mailing Address 1823 S MAIN ST

City State Zip Code
WEATHERFORD TX 76086-5505

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MTMC SALES

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 301.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939832

Amount of Each Receipt this Period

1.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. THOMAS JOHNS

Mailing Address 5236 KIRKWALL LN

City State Zip Code
BIRMINGHAM AL 35242-4123

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 575.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 1 0

Transaction ID: SA11.13967280

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

301.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1119 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. VALERIE A. JOHNSON EVES

Mailing Address 2118 PEREGRINE COURT

City State Zip Code
WEST LINN OR 97068-2829

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JOHNSON HOLDINGS, INC. PRESIDENT OF LUMBER COMPANIES

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13959331

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
VAUGHNCILLE JOHNSON

Mailing Address 8550 TELFORD LN

City State Zip Code
MINNEAPOLIS MN 55443-3744

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1814.50

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13931117

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
VAUGHNCILLE JOHNSON

Mailing Address 8550 TELFORD LN

City State Zip Code
MINNEAPOLIS MN 55443-3744

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1814.50

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13942182

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10075.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1120 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
VAUGHNCILLE JOHNSON

Mailing Address 8550 TELFORD LN

City State Zip Code
MINNEAPOLIS MN 55443-3744

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1814.50

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943089

Amount of Each Receipt this Period 50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
VAUGHNCILLE JOHNSON

Mailing Address 8550 TELFORD LN

City State Zip Code
MINNEAPOLIS MN 55443-3744

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1814.50

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13945683

Amount of Each Receipt this Period 50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
VAUGHNCILLE JOHNSON

Mailing Address 8550 TELFORD LN

City State Zip Code
MINNEAPOLIS MN 55443-3744

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1814.50

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946539

Amount of Each Receipt this Period 75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 175.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1121 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. WALT JOHNSON	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 6907 ARLETA AVE.	Transaction ID: SA11.13945686
	City State Zip Code BAKERSFIELD CA 93308-3861	Amount of Each Receipt this Period 55.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date <input type="checkbox"/> 295.00	

B.	Full Name (Last, First, Middle Initial) MR. WAYNE JOHNSON	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 4433 CONSTANCE BLVD NE	Transaction ID: SA11.13928815
	City State Zip Code ANDOVER MN 55304-5914	Amount of Each Receipt this Period 110.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date <input type="checkbox"/> 320.00	

C.	Full Name (Last, First, Middle Initial) MR. WILLIAM K. JOHNSON	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 105 MILITIA CT	Transaction ID: SA11.13931779
	City State Zip Code YORKTOWN VA 23693-4634	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date <input type="checkbox"/> 250.00	

SUBTOTAL of Receipts This Page (optional)	315.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1122 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. WILLIE LEE JOHNSON	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 62 MARINERS DR.	Transaction ID: SA11.13965391
	City State Zip Code MILLEDGEVILLE GA 31061-7878	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

B.	Full Name (Last, First, Middle Initial) MRS. PATRICIA H. JOKLIK	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 3115 CORNWALL RD	Transaction ID: SA11.13937421
	City State Zip Code DURHAM NC 27707-5101	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer HOMEMAKER	Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	

C.	Full Name (Last, First, Middle Initial) MS. KATHLEEN JOLLEY	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 6750 QUEENS VIEW CIR	Transaction ID: SA11.13943510
	City State Zip Code ANCHORAGE AK 99504-5204	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	

SUBTOTAL of Receipts This Page (optional)	250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1123 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JAMES C. JOLLY

Mailing Address 172 BALMORAL DR

City State Zip Code
MOORESVILLE NC 28117-9200

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944751

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JAMES C. JOLLY

Mailing Address 172 BALMORAL DR

City State Zip Code
MOORESVILLE NC 28117-9200

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958658

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DR. ALISON JONES

Mailing Address 2300 N VERMILION ST

City State Zip Code
DANVILLE IL 61832-1735

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942546

Amount of Each Receipt this Period
750.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

900.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1124 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. BILLY H. JONES		Date of Receipt
	Mailing Address 3817 ASCOT LN		<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	HOUSTON	TX	77092-8305
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer ELLA BLVD MTRS		Occupation AUTO DEALER	Transaction ID: SA11.13949141
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	Amount of Each Receipt this Period <input type="text" value="100.00"/>
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) BONITA L. JONES		Date of Receipt
	Mailing Address 525 75TH ST SE		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	EVERETT	WA	98203-5513
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13932465
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="475.00"/>	Amount of Each Receipt this Period <input type="text" value="150.00"/>
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) CARL JONES		Date of Receipt
	Mailing Address 13 FLORENCE DRIVE		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	CLARK	NJ	07066-1236
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer UNEMPLOYED		Occupation TEMPORARY OFFICE WORKER	Transaction ID: SA11.13931447
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	Amount of Each Receipt this Period <input type="text" value="500.00"/>
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="750.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1125 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. CASEY M. JONES	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 4864 WEST LINE RD	Transaction ID: SA11.13932543
	City State Zip Code WHITESBORO TX 76273-5175	Amount of Each Receipt this Period 51.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	

B.	Full Name (Last, First, Middle Initial) MR. DELWIN G. JONES	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 1300 N MCCLINTOCK DR. STE B4	Transaction ID: SA11.13955914
	City State Zip Code CHANDLER AZ 85226-7241	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer DELWIN G. JONES CPA, INC.	Occupation PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) DONNA M. JONES	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 2617 CLUBLAKE TRL.	Transaction ID: SA11.13930300
	City State Zip Code MCKINNEY TX 75070-4007	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	251.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1126 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DONNA M. JONES

Mailing Address 2617 CLUBLAKE TRL.

City MCKINNEY State TX Zip Code 75070-4007

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13950153
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DUDLEY DAVENPORT JONES, M.D.

Mailing Address 300 N CREEKWOOD DR

City MANSFIELD State TX Zip Code 76063-5428

FEC ID number of contributing federal political committee. **C**

Name of Employer ARLINGTON PATHOLOGY ASSOC.
Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13941077
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DUDLEY DAVENPORT JONES, M.D.

Mailing Address 300 N CREEKWOOD DR

City MANSFIELD State TX Zip Code 76063-5428

FEC ID number of contributing federal political committee. **C**

Name of Employer ARLINGTON PATHOLOGY ASSOC.
Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt: 11 / 17 / 2010
Transaction ID: SA11.13969859
Amount of Each Receipt this Period: 200.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 400.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1127 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ELIZABETH L. JONES		Date of Receipt
	Mailing Address 217 ESSEX MDWS		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 2 / 2 0 1 0
	City	State	Zip Code
	ESSEX	CT	06426-1524
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13948829
		Amount of Each Receipt this Period	<input type="text"/> 400.00
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 680.00	
		CONTRIBUTION	

B.	Full Name (Last, First, Middle Initial) GEORGE B. JONES, JR.		Date of Receipt
	Mailing Address 264 FOUNTAIN ST.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 9 / 2 0 1 0
	City	State	Zip Code
	PHILADELPHIA	PA	19128-4508
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13961916
		Amount of Each Receipt this Period	<input type="text"/> 50.00
Name of Employer RETIRED		Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 450.00	
		CONTRIBUTION	

C.	Full Name (Last, First, Middle Initial) JENK JONES, JR.		Date of Receipt
	Mailing Address 6447 LOUIS MILLS AVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 1 6 / 2 0 1 0
	City	State	Zip Code
	TULSA	OK	74136
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13969211
		Amount of Each Receipt this Period	<input type="text"/> 250.00
Name of Employer RETIRED		Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 1250.00	
		CONTRIBUTION	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 700.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1128 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. JOANNE L. JONES

Mailing Address 5021 MONTEVERDE LN.

City State Zip Code
LINCOLN CA 95648-7912

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934637

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. JOANNE L. JONES

Mailing Address 5021 MONTEVERDE LN.

City State Zip Code
LINCOLN CA 95648-7912

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935025

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. JOANNE L. JONES

Mailing Address 5021 MONTEVERDE LN.

City State Zip Code
LINCOLN CA 95648-7912

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936601

Amount of Each Receipt this Period
1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **81.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1129 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. JOYCE E. JONES	Date of Receipt MM / DD / YYYY 11 / 08 / 2010
	Mailing Address 1302 NE TRILEIN DR	Transaction ID: SA11.13966918
	City State Zip Code ANKENY IA 50021-4510	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 322.00	

B.	Full Name (Last, First, Middle Initial) MS. KATHY J. JONES	Date of Receipt MM / DD / YYYY 11 / 19 / 2010
	Mailing Address 5702 RIDGEROAD DR NW	Transaction ID: SA11.13970052
	City State Zip Code PIEDMONT OK 73078-9728	Amount of Each Receipt this Period 210.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

C.	Full Name (Last, First, Middle Initial) MR. KENNETH L. JONES	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 2227 LIBBEY DRIVE	Transaction ID: SA11.13936290
	City State Zip Code HOUSTON TX 77018-3023	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation KCS RESPIRCES INC. PETROLEUM LAND MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional)	▶	255.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1130 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. LLOYD H. JONES

Mailing Address 7874 N COUNTY RD. 1150 W

City State Zip Code
W BADEN SPRGS IN 47469-9637

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13943175
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LYNN F. JONES

Mailing Address 1907 MILLER AVE

City State Zip Code
MISSION TX 78572-2957

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13939261
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MARY JAYNE JONES

Mailing Address 4170 BOULEVARD PLACE

City State Zip Code
MERCER ISLAND WA 98040-3404

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 17 / 2010
Transaction ID: SA11.13928785
Amount of Each Receipt this Period: 1000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1140.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1131 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. MARY P. JONES		Date of Receipt
	Mailing Address 3218 HALL CIRCLE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 01 / 2010
	City	State	Zip Code
	DULUTH	GA	30096-3348
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13963702
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Amount of Each Receipt this Period	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 50.00	
Occupation INFORMATION REQUESTED PER BEST EFFORTS		CONTRIBUTION	
Aggregate Year-to-Date ▼			
<input type="text"/> 300.00			

B.	Full Name (Last, First, Middle Initial) MR. MAURICE JONES		Date of Receipt
	Mailing Address 485 HIGHWAY 30 E		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 15 / 2010
	City	State	Zip Code
	BOONEVILLE	MS	38829-7960
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13928035
Name of Employer RETIRED		Amount of Each Receipt this Period	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 100.00	
Occupation RETIRED		CONTRIBUTION	
Aggregate Year-to-Date ▼			
<input type="text"/> 310.00			

C.	Full Name (Last, First, Middle Initial) MR. PETER G. JONES		Date of Receipt
	Mailing Address 11705 EDEN GLEN DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 20 / 2010
	City	State	Zip Code
	CARMEL	IN	46033-4336
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13944607
Name of Employer RETIRED		Amount of Each Receipt this Period	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 55.00	
Occupation RETIRED		CONTRIBUTION	
Aggregate Year-to-Date ▼			
<input type="text"/> 210.00			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 205.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1132 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. PETER G. JONES

Mailing Address 11705 EDEN GLEN DR

City State Zip Code
CARMEL IN 46033-4336

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13951951

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
RICHARD JONES

Mailing Address 1 LITTLE PINE ROAD

City State Zip Code
BEDFORD CORNERS NY 10549-4109

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CBS CORPORATION MEDIA EXECUTIVE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951661

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. RONALD G. JONES

Mailing Address 821 BRIGHTON ROAD

City State Zip Code
TONAWANDA NY 14150-7050

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 242.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939059

Amount of Each Receipt this Period

21.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

296.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1133 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. RONALD G. JONES	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 821 BRIGHTON ROAD	Transaction ID: SA11.13949946
	City State Zip Code TONAWANDA NY 14150-7050	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 242.00	

B.	Full Name (Last, First, Middle Initial) MR. RONALD G. JONES	Date of Receipt MM / DD / YYYY 11 / 22 / 2010
	Mailing Address 821 BRIGHTON ROAD	Transaction ID: SA11.13972762
	City State Zip Code TONAWANDA NY 14150-7050	Amount of Each Receipt this Period 21.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 242.00	

C.	Full Name (Last, First, Middle Initial) MR. SAUNDERS JONES	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 66 PINE CREST RD	Transaction ID: SA11.13950436
	City State Zip Code BIRMINGHAM AL 35223-1262	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

SUBTOTAL of Receipts This Page (optional)	141.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1134 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. W. MAT JONES

Mailing Address 719 E MAIN STREET

City State Zip Code
GATESVILLE TX 76528-1431

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 08 / 2010

Transaction ID: SA11.13966787

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WINFRED JONES

Mailing Address P.O. BOX 830

City State Zip Code
HUMBOLDT TN 38343-0830

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 310.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 29 / 2010

Transaction ID: SA11.13961847

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PAUL C. JOQUEL

Mailing Address 1701 W 11TH ST

City State Zip Code
SEDALIA MO 65301-5220

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 331.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 14 / 2010

Transaction ID: SA11.13930234

Amount of Each Receipt this Period
51.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 201.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1135 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. BOYD L. JORDAN

Mailing Address 5023 BETHANY BOWERSVILLE RD

City State Zip Code
CANON GA 30520-3451

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED COURT REPORTER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 660.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951586

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. DAVID C. JORDAN

Mailing Address 916 FAIRLAWN AVE.

City State Zip Code
LIBERTYVILLE IL 60048-3046

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ABBOTT STATISTICIAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 211.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958341

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JOHN JORDAN

Mailing Address 94 S TOMBAY RD

City State Zip Code
BENNETT CO 80102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 245.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13960747

Amount of Each Receipt this Period

55.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

215.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1136 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. JOHN R. JORDAN	Date of Receipt MM / DD / YYYY 11 / 22 / 2010
	Mailing Address 3104 Q. W. HIGHWAY 86 UNIT Q	Transaction ID: SA11.13972860
	City BRAWLEY State CA Zip Code 92227	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer SELF-EMPLOYED Occupation FARMER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) MR. RICHARD S. JORDAN	Date of Receipt MM / DD / YYYY 10 / 29 / 2010
	Mailing Address 1735 N AMARADO CT	Transaction ID: SA11.13962367
	City WICHITA State KS Zip Code 67212-1229	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00	

C.	Full Name (Last, First, Middle Initial) MR. SAMUEL T. JORDAN	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 1325 LARA CIR UNIT 102	Transaction ID: SA11.13931824
	City ROCKLEDGE State FL Zip Code 32955-4460	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 305.00	

SUBTOTAL of Receipts This Page (optional)	225.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1137 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. C. E. JORDON

Mailing Address 800 GEORGIA AVE

City State Zip Code
BURLESON TX 76028-2244

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 331.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939131

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT C. JORDT

Mailing Address 5003 CLUBHOUSE DR

City State Zip Code
NEW BERN NC 28562-2914

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951496

Amount of Each Receipt this Period
60.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. JOSE P. JORGE

Mailing Address 118 INMAN STREET APT 1

City State Zip Code
CAMBRIDGE MA 02139-1206

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954819

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **210.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1138 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. KRAIG JORGENSEN	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 6589 EAGLE DR NE	Transaction ID: SA11.13959608
	City State Zip Code MOSES LAKE WA 98837-9573	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer BEARING SALES INC.	Occupation OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) ABRAHAM JOU	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 2332-A WALSH AVE.	Transaction ID: SA11.13964443
	City State Zip Code SANTA CLARA CA 95051-1318	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer PAYEASE CORP.	Occupation CHAIRMAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) MRS. PRANI JUCKNISS	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 4724 SE WILSHIRE TER	Transaction ID: SA11.13949170
	City State Zip Code LAWTON OK 73501-6430	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 381.00	

SUBTOTAL of Receipts This Page (optional)	740.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1139 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. ALICE G. JUDD

Mailing Address P.O. BOX 396

City PLEASANT VLY State CT Zip Code 06063-0396

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 253.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13944190
Amount of Each Receipt this Period: 3.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DALE JUNTILLA

Mailing Address 754 CASTLEMAN DR.

City WESTFIELD State NJ Zip Code 07090-2010

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 327.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13954119
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GILBERT G. JURENKA

Mailing Address 210 DORAL LN

City ROCKPORT State TX Zip Code 78382-6913

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 406.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13936464
Amount of Each Receipt this Period: 1.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 29.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1140 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DANGUOLE JURGUTIS	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 5842 GLEN EAGLES DR.	Transaction ID: SA11.13957287
	City State Zip Code W BLOOMFIELD MI 48323-2205	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) MR. VICTOR R. JURY, SR.	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 8308 THISTLE CT	Transaction ID: SA11.13945070
	City State Zip Code NORTH RICHLAND HIL TX 76182-8640	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) MR. ROBERT JUST	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 146 STAHL DR	Transaction ID: SA11.13941486
	City State Zip Code SMITHTON IL 62285-1404	Amount of Each Receipt this Period 51.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 311.00	

SUBTOTAL of Receipts This Page (optional)	301.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1141 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOHN L. KACALA, III

Mailing Address 2855 HOMEYER RD

City State Zip Code
N TONAWANDA NY 14120-1025

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation ELDER CARE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956488

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LAWRENCE KADISH

Mailing Address 135 JERICHO TURNPIKE

City State Zip Code
OLD WESTBURY NY 11568-1508

FEC ID number of contributing federal political committee. **C**

Name of Employer FIRST FISCAL FUND COMPANY Occupation BUSINESSMAN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 10000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13951143

Amount of Each Receipt this Period
10000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DIETER KAESGEN

Mailing Address 19460 FRAZIER DR.

City State Zip Code
ROCKY RIVER OH 44116-1727

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13931258

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **10450.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1142 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DIETER KAESGEN

Mailing Address 19460 FRAZIER DR.

City State Zip Code
ROCKY RIVER OH 44116-1727

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13955069

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RONALD KAHN

Mailing Address 1200 BRIARCREST DR
STE 4000

City State Zip Code
BRYAN TX 77802-5234

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LONESTAR HEALTHCARE GROUP INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13928857

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DOUGLAS A. KAHR

Mailing Address 506 TANASI LAGOON DR

City State Zip Code
LOUDON TN 37774-3232

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13940653

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **250.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1143 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. PATRICIA H. KALAN	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 3185 BROADMOOR AVE	Transaction ID: SA11.13942590
	City State Zip Code COLUMBUS OH 43209-2004	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer TRANS HEALTH	Occupation REGISTERED NURSE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 421.00	

B.	Full Name (Last, First, Middle Initial) MR. PETER S. KALIKOW	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 101 PARK AVENUE 25TH FLOOR	Transaction ID: SA11.13951140
	City State Zip Code NEW YORK NY 10178-0002	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer H.J. KALIKOW & COMPANY	Occupation REAL ESTATE EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

C.	Full Name (Last, First, Middle Initial) MARILYN KALIN	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 251 HELM LN.	Transaction ID: SA11.13950133
	City State Zip Code BAY SHORE NY 11706-8109	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)	5160.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1144 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. JANICE G. KALISKI		Date of Receipt
	Mailing Address 142 PEAK ST		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	MANCHESTER	NH	03104-3804
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer NHCTC-MANCHESTER		Occupation COLLEGE PROFESSOR	Transaction ID: SA11.13931518
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="310.00"/>	<input type="text" value="110.00"/>
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) MR. KENNETH J. KALL		Date of Receipt
	Mailing Address 5503 COKE AVENUE		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	LAKESWOOD	CA	90712-1627
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13960334
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="220.00"/>	<input type="text" value="60.00"/>
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) MR. TOM KALLENBERG		Date of Receipt
	Mailing Address 1377 CR 456		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	PRINCETON	TX	75407-5089
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer SELF-EMPLOYED		Occupation ENGINEER	Transaction ID: SA11.13951603
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="300.00"/>	<input type="text" value="50.00"/>
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="220.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1145 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JOHN E. KALMEY

Mailing Address 2640 ZARING MILL RD.

City State Zip Code
SHELBYVILLE KY 40065-9241

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13931410

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. KAREN L. KAMP

Mailing Address 5124 WILDFLOWER WAY

City State Zip Code
FORT WORTH TX 76123-1948

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER REGISTERED NURSE
BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 410.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950561

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MELVYN KANAI

Mailing Address 718 OLD SAN FRANCISCO RD. APT.

City State Zip Code
SUNNYVALE CA 94086-8057

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13969270

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

320.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1146 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GEORGE V. KANE, JR.
Mailing Address 6236 CEDAR CREEK DR
City HOUSTON State TX Zip Code 77057-1804
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13933499
Amount of Each Receipt this Period 20.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JEAN KANE
Mailing Address 3516 HARLINGTON LN.
City RICHARDSON State TX Zip Code 75082-3536
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 326.00
Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13941642
Amount of Each Receipt this Period 101.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT M. KANE
Mailing Address PO BOX 518
City BARTLESVILLE State OK Zip Code 74005-0518
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation OIL & GAS PRODUCER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 10 / 15 / 2010
Transaction ID: SA11.13932343
Amount of Each Receipt this Period 1000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1121.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1147 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ANDREW G. KANELOS

Mailing Address 7022 GARDNER POND CT APT 1
APT. 1

City State Zip Code
CHARLOTTE NC 28270

FEC ID number of contributing federal political committee. **C**

Name of Employer
TRANSAMERICA LIFE INSURANCE CO

Occupation
INSURANCE EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956989

Amount of Each Receipt this Period

40.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. CHARLES T. KANNEBECKER

Mailing Address PO BOX 751

City State Zip Code
DINGMANS FRY PA 18328-0751

FEC ID number of contributing federal political committee. **C**

Name of Employer
SELF-EMPLOYED

Occupation
PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13951135

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. MARVIN R. KANSTEINER

Mailing Address 922 W 139TH CT

City State Zip Code
WESTMINSTER CO 80023-9357

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931846

Amount of Each Receipt this Period

155.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10195.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1148 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. VALERIE KANTER

Mailing Address 127 JAFFREY RD

City MALVERN State PA Zip Code 19355-3417

FEC ID number of contributing federal political committee. **C**

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13945440
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. TIMOTHY J. KAPFHAMER

Mailing Address W808 COUNTY RD N

City COLBY State WI Zip Code 54421-8970

FEC ID number of contributing federal political committee. **C**

Name of Employer: WAL-MART Occupation: ASSOCIATE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13946910
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. PATRICIA KARAMELAS

Mailing Address 485 MONDI DR.

City WOODSTOCK State GA Zip Code 30188-3000

FEC ID number of contributing federal political committee. **C**

Name of Employer: INFORMATION REQUESTED PER BEST EFFORTS Occupation: INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13931630
Amount of Each Receipt this Period: 90.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 165.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1149 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. VICTOR KAREH

Mailing Address 22 PLAYERS GREEN

City State Zip Code
THE WOODLANDS TX 77382-2901

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	1	0

Transaction ID: SA11.13958242

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JONATHAN KARIS

Mailing Address 401 9TH STREET, NW
SUITE 900

City State Zip Code
WASHINGTON DC 20004-2145

FEC ID number of contributing federal political committee. **C**

Name of Employer NIXON & PEABODY Occupation ATTORNEY

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 749.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	0	/	2	0	1	0

Transaction ID: SA11.13968687

Amount of Each Receipt this Period
749.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PAUL KARITIS

Mailing Address 14084 NW MEADOWRIDGE DR

City State Zip Code
PORTLAND OR 97229-2386

FEC ID number of contributing federal political committee. **C**

Name of Employer GLOBAL LOGISTICS, INC. Occupation PRESIDENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	1	0

Transaction ID: SA11.13932409

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **3499.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1150 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
ALICE KARR

Mailing Address 1716 KINGSLEY ST.

City State Zip Code
THE DALLES OR 97058-4388

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 455.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2010

Transaction ID: SA11.13951430

Amount of Each Receipt this Period
105.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DR. ROBERT KASPER

Mailing Address 7 HIGHMORE CIR

City State Zip Code
EAST LONGMEADOW MA 01028-2523

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WESTOVER AIR FORCE BASE INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13947771

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. LOIS REE KATZ

Mailing Address 14613 LOLA AVE

City State Zip Code
WASECA MN 56093-9002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13960842

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 630.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1151 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. ANNE B. KAUFFMAN

Mailing Address 114 KENDAL DR.

City State Zip Code
GRANVILLE OH 43023-8026

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 19 / 2010

Transaction ID: SA11.13972165

Amount of Each Receipt this Period
80.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. CAMPBELL KAUFMAN

Mailing Address 300 INDEPENDENCE AVE., SE

City State Zip Code
WASHINGTON DC 20003-1021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CONERSTONE GOVERNMENT AFFAIRS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 29 / 2010

Transaction ID: SA11.13959397

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. GARY KAUFMAN

Mailing Address 4 PARK AVENUE
APARTMENT 5E

City State Zip Code
NEW YORK NY 10016-5306

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED ATTORNEY

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 425.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 21 / 2010

Transaction ID: SA11.13946957

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

355.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1152 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GEORGE S. KAUFMAN

Mailing Address 450 SEVENTH AVENUE

City State Zip Code
NEW YORK NY 10123-0207

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation REALTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13951128

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. THOMAS J. KAVANAGH

Mailing Address 1973 MAGDALENE WAY

City State Zip Code
SAN DIEGO CA 92110-1308

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961882

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
REBEKAH KAY

Mailing Address 5233 VANDERBILT AVE

City State Zip Code
DALLAS TX 75206-6019

FEC ID number of contributing federal political committee. **C**

Name of Employer ENERGY FUTURE HOLDINGS
Occupation DIRECTOR, POLITICAL AFFAIRS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918902

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **2850.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1153 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. PAUL J. KAZLAUSKAS

Mailing Address 22 BAILEY HILL VILLAGE

City State Zip Code
DANIELSON CT 06239-3425

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GENERAL DYNAMICS ELECTRIC BOAT 1ST CLASS TEST MECHANIC R&D

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 265.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958283

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
JAN KAZMIER

Mailing Address 710 HARBOR POINT DR.

City State Zip Code
JOHNSON CITY TN 37615-2977

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 401.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950465

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JOHN J. KEARNEY

Mailing Address 6314 BARRISTER PL

City State Zip Code
ALEXANDRIA VA 22307-1214

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930623

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

175.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 1154 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOHN J. KEARNEY

Mailing Address 6314 BARRISTER PL

City State Zip Code
ALEXANDRIA VA 22307-1214

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934979

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RICHARD V. KEARNEY

Mailing Address 19355 CYPRESS RIDGE TER UNIT 6

City State Zip Code
LEESBURG VA 20176-6912

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940214

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. MARION A. KEATING

Mailing Address 7207 OBSIDIAN LANE

City State Zip Code
CASTLE ROCK CO 80108-3083

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944641

Amount of Each Receipt this Period
110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **260.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1155 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JACK D. KEE

Mailing Address 4188 BRIDGEWATER CT.

City SAINT PAUL State MN Zip Code 55127-6984

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13933411
Amount of Each Receipt this Period: 105.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JAMES KEE

Mailing Address 2852 PINELAWN DR

City LA CRESCENTA State CA Zip Code 91214-1348

FEC ID number of contributing federal political committee. **C**

Name of Employer BANK OF AMERICA
Occupation PROCESS DESIGN EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 10 / 23 / 2010
Transaction ID: SA11.13947663
Amount of Each Receipt this Period: 160.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOSEPH T. KEELEY

Mailing Address 3285 KENDALL ST

City WHEAT RIDGE State CO Zip Code 80033-7447

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13957134
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 290.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1156 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JOSEPH S. KEELTY

Mailing Address 1011 WINDING WAY

City State Zip Code
BALTIMORE MD 21210-1232

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 4000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956735

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. PHIL J. KEENAN

Mailing Address 4825 PASEO DE LAS TORTUGAS

City State Zip Code
TORRANCE CA 90505-6337

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CITY OF RB POLICE OFFICER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 315.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949104

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
HENRY KEENE

Mailing Address 2051 SEA LEVEL DR. APT. 305

City State Zip Code
KETCHIKAN AK 99901-6068

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 950.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940611

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1625.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1157 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
HENRY KEENE
 Mailing Address 2051 SEA LEVEL DR. APT. 305
 City State Zip Code
KETCHIKAN AK 99901-6068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
RETIRED RETIRED
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 950.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 9 / 2 0 1 0
Transaction ID: SA11.13941086
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GLEN R. KEETON, SR.
 Mailing Address 6730 KROPP RD
 City State Zip Code
GROVE CITY OH 43123-9785
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
RETIRED RETIRED
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 270.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 5 / 2 0 1 0
Transaction ID: SA11.13954878
 Amount of Each Receipt this Period
 35.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. KERRY L. KEETON
 Mailing Address 2715 FM 2554
 City State Zip Code
IVANHOE TX 75447-3227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
RETIRED RETIRED
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 4 / 2 0 1 0
Transaction ID: SA11.13930618
 Amount of Each Receipt this Period
 60.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 345.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1158 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. KERRY L. KEETON

Mailing Address 2715 FM 2554

City State Zip Code
IVANHOE TX 75447-3227

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945528

Amount of Each Receipt this Period

30.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. MARTIN KEHOE

Mailing Address 11627 SW SUMMERVILLE AVENUE

City State Zip Code
PORTLAND OR 97219-8390

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MK DEVELOPMENT REAL ESTATE DEVELOPMENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13958252

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. KURT KEILHACKER

Mailing Address 431 PROMONTORY DRIVE E

City State Zip Code
NEWPORT BEACH CA 92660-7447

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TECHFUND CAPITAL MANAGING DIRECTOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13932430

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6030.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1159 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
WARREN C. KEINATH

Mailing Address 24 RAVENS POINTE

City State Zip Code
LAKE ST LOUIS MO 63367-2238

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 701.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939047

Amount of Each Receipt this Period

501.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DAN KEISHIAN

Mailing Address 458 E PACES FERRY RD. NE

City State Zip Code
ATLANTA GA 30305-3301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED APPRAISER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 211.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933044

Amount of Each Receipt this Period

51.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
KEITH F. KEITEL

Mailing Address 1030 TIVERTON AVE APT. 117

City State Zip Code
LOS ANGELES CA 90024-3001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ATK WOODLAND HILLS CA ENGINEER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 380.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941135

Amount of Each Receipt this Period

30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

582.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1160 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DONNA KEITH

Mailing Address 20336 HOMELAND

City State Zip Code
ROSEVILLE MI 48066-1763

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UNEMPLOYED UNEMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13942827

Amount of Each Receipt this Period
30.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DONALD M. KELLER

Mailing Address 2165 HAWKSRIDGE DR APT 1303
APT 1303

City State Zip Code
NAPLES FL 34105-8530

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1230.00

Date of Receipt
MM / DD / YYYY
10 / 20 / 2010

Transaction ID: SA11.13944529

Amount of Each Receipt this Period
150.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DONALD M. KELLER

Mailing Address 2165 HAWKSRIDGE DR APT 1303
APT 1303

City State Zip Code
NAPLES FL 34105-8530

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1230.00

Date of Receipt
MM / DD / YYYY
11 / 16 / 2010

Transaction ID: SA11.13969167

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

220.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1161 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DONALD M. KELLER

Mailing Address 2165 HAWKSRIDGE DR APT 1303
APT 1303

City State Zip Code
NAPLES FL 34105-8530

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 7 / 2 0 1 0

Transaction ID: SA11.13969840

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. KIM D. KELLER

Mailing Address 14106 CHAMPIONS HAMLET CT

City State Zip Code
HOUSTON TX 77069-1846

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
KIM D KELLER MD PA OWNER

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13958247

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MARGARET KELLEY

Mailing Address 6759 E GEDDES LN

City State Zip Code
ENGLEWOOD CO 80112-1573

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931855

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1162 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. MARCIA EVE KELLEY

Mailing Address 25 HIGHLAND ROAD

City State Zip Code
RICHMOND VA 23229-8518

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation FAMILY MEDICATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 470.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955083

Amount of Each Receipt this Period
60.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. MICHAEL KELLEY

Mailing Address 2500 MAYNARD RD

City State Zip Code
CHARLOTTE NC 28270-0754

FEC ID number of contributing federal political committee. **C**

Name of Employer CHARLOTTE RADIOLOGY, PA Occupation PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13957989

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. MICHAEL G. KELLER

Mailing Address 11774 QUAIL CREEK

City State Zip Code
HOUSTON TX 77070-2352

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13959352

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **5310.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1163 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) NANCY KELLER	Date of Receipt MM / DD / YYYY 10 / 29 / 2010
	Mailing Address P.O. BOX 25009	Transaction ID: SA11.13961498
	City State Zip Code ASHEVILLE NC 28813-1009	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1135.00	

B.	Full Name (Last, First, Middle Initial) MR. TIMOTHY KELLEY	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 4 GROVE ST	Transaction ID: SA11.13918435
	City State Zip Code PLEASANTVILLE NY 10570-2104	Amount of Each Receipt this Period 110.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation BROHNDOW INC SMALL BUSINESS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

C.	Full Name (Last, First, Middle Initial) KATHERINE KELLOGG	Date of Receipt MM / DD / YYYY 11 / 08 / 2010
	Mailing Address 208 HIGHPOINT CIR.	Transaction ID: SA11.13966903
	City State Zip Code VALLEY VIEW TX 76272-7314	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

SUBTOTAL of Receipts This Page (optional)	▶	285.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1164 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. THOMAS J. KELLOGG	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 1776 S JACKSON ST STE 501	Transaction ID: SA11.13955810
	City State Zip Code DENVER CO 80210-3851	Amount of Each Receipt this Period 110.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation WESVIEW INVESTORS MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 370.00	

B.	Full Name (Last, First, Middle Initial) MRS. BETTY J. KELLY	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 1361 SEA HAWK LN	Transaction ID: SA11.13934222
	City State Zip Code VERO BEACH FL 32963-2522	Amount of Each Receipt this Period 1.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	

C.	Full Name (Last, First, Middle Initial) MS. CAROL KELLY	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 3901 HIGHWOOD COURT NW	Transaction ID: SA11.13930709
	City State Zip Code WASHINGTON DC 20007-2132	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation NATL ASSN OF CHAIN DRUG STORES GOVT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

SUBTOTAL of Receipts This Page (optional)	261.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1165 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. CONNIE J. KELLY

Mailing Address 9828 WITHERS RD.

City State Zip Code
CHARLOTTE NC 28278-6821

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HEILINE ELECTRONICS SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939245

Amount of Each Receipt this Period
20.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DON R. KELLY

Mailing Address 171 NORTH VIEW RIDGE LANE

City State Zip Code
BOZEMAN MT 59715-7806

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DON KELLY CONSTRUCTION, INC. OWNER/CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 20000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13932344

Amount of Each Receipt this Period
20000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. DORIS A. KELLY

Mailing Address 9957 BURL WAY

City State Zip Code
ORLANDO FL 32817-4254

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1216.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944791

Amount of Each Receipt this Period
35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 20055.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1166 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. DORIS A. KELLY

Mailing Address 9957 BURL WAY

City State Zip Code
ORLANDO FL 32817-4254

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1216.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953006

Amount of Each Receipt this Period
35.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GAIL KELLY

Mailing Address 3439 WELLSPRINGS DRIVE

City State Zip Code
SAN ANTONIO TX 78230-2511

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 579.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13965108

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GAIL KELLY

Mailing Address 3439 WELLSPRINGS DRIVE

City State Zip Code
SAN ANTONIO TX 78230-2511

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 579.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 1 0

Transaction ID: SA11.13968023

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

110.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1167 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
GAIL KELLY

Mailing Address 3439 WELLSPRINGS DRIVE

City State Zip Code
SAN ANTONIO TX 78230-2511

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 579.00

Date of Receipt
MM / DD / YYYY
11 / 18 / 2010

Transaction ID: SA11.13969997

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JAMES D. KELLY

Mailing Address 310 REHOBOTH ROAD

City State Zip Code
BELLE VERNON PA 15012-3900

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED GENERAL CONTRACTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2010

Transaction ID: SA11.13951439

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. LISA G. KELLY

Mailing Address 171 NORTH VIEW RIDGE LANE

City State Zip Code
BOZEMAN MT 59715-7806

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DON KELLY CONSTRUCTION, INC. OFFICE MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 20000.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2010

Transaction ID: SA11.13932345

Amount of Each Receipt this Period
20000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 20225.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1169 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. ROSEANN D. KELLY

Mailing Address 8 PRINCETON ROAD

City State Zip Code
CARMEL NY 10512-5642

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 390.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13960745

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. BILL KELTNER

Mailing Address 10740 KENNEY STREET
SUITE 401

City State Zip Code
SANTEE CA 92071-4573

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SYNERGY ELECTRIC OWNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13960735

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. CLOA W. KEMBLE

Mailing Address 255 TEXAS ST.
APARTMENT 430

City State Zip Code
RAPID CITY SD 57701-7319

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 351.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932921

Amount of Each Receipt this Period

51.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

661.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1170 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. MELVIN KEMP

Mailing Address 1906 NATALEE DR

City Henderson State NV Zip Code 89011-4325

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 570.00

Date of Receipt 10 / 26 / 2010
Transaction ID: SA11.13951434
Amount of Each Receipt this Period 210.00
CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. NANCY C. KEMP

Mailing Address 120 LONGVIEW CIR

City MEDIA State PA Zip Code 19063-2075

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 29 / 2010
Transaction ID: SA11.13961974
Amount of Each Receipt this Period 75.00
CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. STEVEN A. KEMPE

Mailing Address 4911 SHILOH LAKE DR.

City RICHMOND State TX Zip Code 77407-8510

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt 10 / 27 / 2010
Transaction ID: SA11.13955871
Amount of Each Receipt this Period 210.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **495.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1171 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOSEPH M. KEMPF

Mailing Address 14014 FLINT ROCK RD

City State Zip Code
ROCKVILLE MD 20853-2651

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SECURITIES & EXCHANGE COM- ACCOUNTANT-FEDERAL REGULATOR
MISSION

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948931

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. NEALE KEMPNER

Mailing Address 2719 KIPLING ST APT A

City State Zip Code
HOUSTON TX 77098-1254

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 695.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928850

Amount of Each Receipt this Period
110.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. RICHARD KENDALL

Mailing Address 2318 ACORN MEADOWS LANE

City State Zip Code
MANTECA CA 95336-5103

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 345.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937220

Amount of Each Receipt this Period
65.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 225.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1172 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. FRANCIS J. KENDRICK

Mailing Address 1251 PARADISE WAY

City State Zip Code
VENICE FL 34285-6412

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918910

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. EDWIN C. KENNEDY

Mailing Address 4200 OLD OMEN RD APT NO 2301

City State Zip Code
TYLER TX 75707

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933967

Amount of Each Receipt this Period
35.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GARLAND M. KENNEDY, SR.

Mailing Address 4702 OSO PKWY.

City State Zip Code
CRP CHRISTI TX 78413-5271

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13969165

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 235.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1173 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GERALD F. KENNEDY

Mailing Address 18301 NE 184TH. ST.

City State Zip Code
BRUSH PRAIRIE WA 98606-8609

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943418

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. JOAN F. KENNEDY

Mailing Address 2108 CHEYENNE DR.

City State Zip Code
MCCOMB MS 39648-6324

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 356.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13965350

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN R. KENNEDY

Mailing Address 606 SOUTHGATE RD

City State Zip Code
ABERDEEN MD 21001-1617

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
U. S. ARMY PHYSICAL SCIENTIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 429.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13947281

Amount of Each Receipt this Period
105.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 655.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1174 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. JOSEPH KENNEALLY	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 8 / 2 0 1 0
	Mailing Address 6 WELLSRING RD UNIT C	Transaction ID: SA11.13957654
	City Biddeford State ME Zip Code 04005-9415	Amount of Each Receipt this Period 260.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer SELF-EMPLOYED Occupation DENTIST Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 260.00	

B.	Full Name (Last, First, Middle Initial) ROBERT KENNEDY	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	Mailing Address 4 JASON CT	Transaction ID: SA11.13952534
	City Scotch Plains State NJ Zip Code 07076-2857	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 301.00	

C.	Full Name (Last, First, Middle Initial) DENNIS G. KENNY	Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 1 0
	Mailing Address 1435 FRANKLIN	Transaction ID: SA11.13966543
	City River Forest State IL Zip Code 60305-1040	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer KENNY & KENNY P.C. Occupation CERTIFIED PUBLIC ACCOUNTANT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional)	410.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1175 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
PATRICK D. J. KENNY

Mailing Address 4865 TURNBERRY LN

City State Zip Code
COLUMBUS GA 31909-2080

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SHAW GROUP ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959658

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PATRICIA M. KENT

Mailing Address 3257 FALCON DR

City State Zip Code
ABILENE TX 79606-3312

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HENDRICK MED REGISTERED NURSE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918684

Amount of Each Receipt this Period
55.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ANTHONY T. KENYON

Mailing Address P.O. BOX 1511

City State Zip Code
COOS BAY OR 97420-0332

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TOP SERVICE BODY SHOP JANITOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 376.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933256

Amount of Each Receipt this Period
41.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 196.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1176 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ANTHONY T. KENYON
Mailing Address P.O. BOX 1511
City COOS BAY State OR Zip Code 97420-0332
FEC ID number of contributing federal political committee. **C**
Name of Employer TOP SERVICE BODY SHOP Occupation JANITOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 376.00
Date of Receipt 10 / 21 / 2010
Transaction ID: SA11.13946452
Amount of Each Receipt this Period 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ANTHONY T. KENYON
Mailing Address P.O. BOX 1511
City COOS BAY State OR Zip Code 97420-0332
FEC ID number of contributing federal political committee. **C**
Name of Employer TOP SERVICE BODY SHOP Occupation JANITOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 376.00
Date of Receipt 10 / 26 / 2010
Transaction ID: SA11.13956082
Amount of Each Receipt this Period 40.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. THOMAS M. KENYON
Mailing Address 12 WHEELER AVE
City FAYETTEVILLE State NY Zip Code 13066-2531
FEC ID number of contributing federal political committee. **C**
Name of Employer GEIS Occupation S Y S ANALSYST
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13941812
Amount of Each Receipt this Period 75.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 165.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1177 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. BARBARA D. KEOUGH
Mailing Address 137 DAVIS RD.

City State Zip Code
MALVERN PA 19355-3427

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
501.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 01 / 2010

Transaction ID: SA11.13960727

Amount of Each Receipt this Period
85.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. FRED W. KEPPLER
Mailing Address 6274 W. HIGHLAND AVENUE

City State Zip Code
PHOENIX AZ 85033-2120

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
226.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 14 / 2010

Transaction ID: SA11.13930191

Amount of Each Receipt this Period
41.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
JACK G. KEPPLER
Mailing Address 1780 WACO RD.

City State Zip Code
BUSHNELL IL 61422-9122

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 29 / 2010

Transaction ID: SA11.13961322

Amount of Each Receipt this Period
35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

161.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1178 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. EVELYN J. KERBER		Date of Receipt MM / DD / YYYY 11 / 05 / 2010		
	Mailing Address 29747 EAGLE POINT DR		Transaction ID: SA11.13966242		
	City CANYON LAKE	State CA	Zip Code 92587-7911	Amount of Each Receipt this Period 200.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 410.00			

B.	Full Name (Last, First, Middle Initial) MR. GEORGE H. KERCKHOVE		Date of Receipt MM / DD / YYYY 10 / 27 / 2010		
	Mailing Address N5854 ABNET ROAD		Transaction ID: SA11.13958402		
	City ONALASKA	State WI	Zip Code 54650-8925	Amount of Each Receipt this Period 45.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 490.00			

C.	Full Name (Last, First, Middle Initial) MR. ANDREW P. KERN		Date of Receipt MM / DD / YYYY 10 / 20 / 2010		
	Mailing Address 19431 W PINEY POINT AVENUE		Transaction ID: SA11.13942443		
	City BATON ROUGE	State LA	Zip Code 70817-2738	Amount of Each Receipt this Period 510.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
Name of Employer DELTA CONCRETE		Occupation VICE PRESIDENT			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 510.00			

SUBTOTAL of Receipts This Page (optional)	755.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1179 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
ROBERT FLEMING KERN

Mailing Address 3033 LORIDAN WAY SE

City State Zip Code
ATLANTA GA 30339-5710

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950350

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. CHARLES G. KERNS

Mailing Address 5805 MAPLE BROOK DR

City State Zip Code
MIDLOTHIAN VA 23112-6324

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13964537

Amount of Each Receipt this Period

10.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. CHARLES G. KERNS

Mailing Address 5805 MAPLE BROOK DR

City State Zip Code
MIDLOTHIAN VA 23112-6324

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 1 0

Transaction ID: SA11.13967199

Amount of Each Receipt this Period

15.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

275.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1180 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MR. CHARLES G. KERNS</p> <p>Mailing Address 5805 MAPLE BROOK DR</p> <p>City State Zip Code MIDLOTHIAN VA 23112-6324</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 225.00</p>	<p>Date of Receipt MM / DD / YYYY 11 / 15 / 2010</p> <p>Transaction ID: SA11.13968032</p> <p>Amount of Each Receipt this Period 20.00</p> <p>CONTRIBUTION</p>
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<p>B. Full Name (Last, First, Middle Initial) MS. SHARON L. KERNS</p> <p>Mailing Address 7307 FALLS VIEW CIR</p> <p>City State Zip Code DELAWARE OH 43015-6013</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 236.00</p>	<p>Date of Receipt MM / DD / YYYY 11 / 02 / 2010</p> <p>Transaction ID: SA11.13964887</p> <p>Amount of Each Receipt this Period 20.00</p> <p>CONTRIBUTION</p>
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<p>C. Full Name (Last, First, Middle Initial) MS. SHARON L. KERNS</p> <p>Mailing Address 7307 FALLS VIEW CIR</p> <p>City State Zip Code DELAWARE OH 43015-6013</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 236.00</p>	<p>Date of Receipt MM / DD / YYYY 11 / 16 / 2010</p> <p>Transaction ID: SA11.13969398</p> <p>Amount of Each Receipt this Period 35.00</p> <p>CONTRIBUTION</p>
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SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1181 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
GILKEY ALICE KERR

Mailing Address 1716 KINGSLEY ST.

City THE DALLES State OR Zip Code 97058-4388

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13951017
 Amount of Each Receipt this Period: 30.00
CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
GILKEY ALICE KERR

Mailing Address 1716 KINGSLEY ST.

City THE DALLES State OR Zip Code 97058-4388

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt: 11 / 18 / 2010
Transaction ID: SA11.13971431
 Amount of Each Receipt this Period: 35.00
CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. E. B. KERSH

Mailing Address 1210 MUSTANG TRL.

City HUMBLE State TX Zip Code 77339-3208

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt: 11 / 18 / 2010
Transaction ID: SA11.13971255
 Amount of Each Receipt this Period: 1200.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1265.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1182 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
THOMAS A. KERSHAW

Mailing Address 84 BEACON ST.

City State Zip Code
BOSTON MA 02108-3421

FEC ID number of contributing federal political committee. **C**

Name of Employer HAMPSHIRE HOUSE CORP Occupation OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956217

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. GEORGE J. KERTESZ

Mailing Address 2996 LONGLEAT WOODS

City State Zip Code
SARASOTA FL 34235-6865

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939142

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. RONALD NORMAN KESSLER

Mailing Address P.O. BOX 1858

City State Zip Code
YOUNGSTOWN OH 44501-1858

FEC ID number of contributing federal political committee. **C**

Name of Employer BOARDMAN MOLDED INTERNATIONAL LLC Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940884

Amount of Each Receipt this Period
150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **500.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1183 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) SUSAN W. KEY	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 2801 TURTLE CREEK BLVD. APT. 2	Transaction ID: SA11.13941475
	City State Zip Code DALLAS TX 75219-4802	Amount of Each Receipt this Period 251.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00	

B.	Full Name (Last, First, Middle Initial) MR. GEOFFREY J. KEYES	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 1556 FOXLEIGH COURT	Transaction ID: SA11.13945621
	City State Zip Code SAINT LOUIS MO 63131-1229	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer MONSANTO	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 339.00	

C.	Full Name (Last, First, Middle Initial) MR. PETER W. KEYES	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 680 NW 68TH AVENUE	Transaction ID: SA11.13958347
	City State Zip Code PLANTATION FL 33317-1737	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer FIDELITY NATIONAL TITLE	Occupation TITLE EXAMINER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	426.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1184 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. IMTIAZ KHALID

Mailing Address 117 WILLOW VIEW LN

City State Zip Code
CANTON GA 30114-7735

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959141

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. VADIM KHIDEKEL

Mailing Address 415 WHITE OAK RIDGE RD.

City State Zip Code
SHORT HILLS NJ 07078-1232

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ART ADVISORS, LLC ANALYST

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961584

Amount of Each Receipt this Period

61.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ROBERT E. KIER

Mailing Address 500 BAY AVE

City State Zip Code
OCEAN CITY NJ 08226-3979

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 616.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937256

Amount of Each Receipt this Period

40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

201.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1185 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MARC KILBRIDE

Mailing Address 2101 WROXTON RD

City HOUSTON State TX Zip Code 77005-1533

FEC ID number of contributing federal political committee. **C**

Name of Employer CENTERPOINT ENERGY Occupation TREASURER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1060.00

Date of Receipt 10 / 16 / 2010
Transaction ID: SA11.13928711
Amount of Each Receipt this Period 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MARC KILBRIDE

Mailing Address 2101 WROXTON RD

City HOUSTON State TX Zip Code 77005-1533

FEC ID number of contributing federal political committee. **C**

Name of Employer CENTERPOINT ENERGY Occupation TREASURER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1060.00

Date of Receipt 10 / 26 / 2010
Transaction ID: SA11.13955641
Amount of Each Receipt this Period 50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MARC KILBRIDE

Mailing Address 2101 WROXTON RD

City HOUSTON State TX Zip Code 77005-1533

FEC ID number of contributing federal political committee. **C**

Name of Employer CENTERPOINT ENERGY Occupation TREASURER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1060.00

Date of Receipt 10 / 28 / 2010
Transaction ID: SA11.13959009
Amount of Each Receipt this Period 100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 200.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1186 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. MICHAEL KILBURN		Date of Receipt
	Mailing Address 808 SAMMY CT		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	ELIZABETHTOWN	KY	42701-3140
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer RETIRED		Occupation RETIRED	Transaction ID: SA11.13933058
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="251.00"/>	Amount of Each Receipt this Period <input type="text" value="51.00"/>
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MS. CATHERINE KILEY		Date of Receipt
	Mailing Address 6279 WITHERS CT		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	HARRISBURG	PA	17111-6955
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13928081
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="270.00"/>	Amount of Each Receipt this Period <input type="text" value="160.00"/>
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) DONALD E. KILLOREN		Date of Receipt
	Mailing Address P.O. BOX 1120		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	HOT SPRINGS	VA	24445-1120
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer CELEBRATION ASSOCIATES LLC		Occupation REAL ESTATE DEVELPOER	Transaction ID: SA11.13954386
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="275.00"/>	Amount of Each Receipt this Period <input type="text" value="50.00"/>
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="261.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1187 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. CHARLES KILPATRICK	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 250 N LENDERMAN RD	Transaction ID: SA11.13944781
	City State Zip Code BYHALIA MS 38611-6304	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) MS. JAIME KIM	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 14044 34TH AVE. APARTMENT 1C	Transaction ID: SA11.13935699
	City State Zip Code FLUSHING NY 11354-3067	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1830.00	

C.	Full Name (Last, First, Middle Initial) MS. JAIME KIM	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 14044 34TH AVE. APARTMENT 1C	Transaction ID: SA11.13944721
	City State Zip Code FLUSHING NY 11354-3067	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1830.00	

SUBTOTAL of Receipts This Page (optional)	▶	270.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1188 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. JAIME KIM		Date of Receipt MM / DD / YYYY 10 / 22 / 2010		
	Mailing Address 14044 34TH AVE. APARTMENT 1C		Transaction ID: SA11.13949048		
	City FLUSHING	State NY	Zip Code 11354-3067	Amount of Each Receipt this Period 75.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation INFORMATION REQUESTED PER BEST EFFORTS Aggregate Year-to-Date ▼ 1830.00		

B.	Full Name (Last, First, Middle Initial) MS. JAIME KIM		Date of Receipt MM / DD / YYYY 10 / 25 / 2010		
	Mailing Address 14044 34TH AVE. APARTMENT 1C		Transaction ID: SA11.13952631		
	City FLUSHING	State NY	Zip Code 11354-3067	Amount of Each Receipt this Period 75.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation INFORMATION REQUESTED PER BEST EFFORTS Aggregate Year-to-Date ▼ 1830.00		

C.	Full Name (Last, First, Middle Initial) MR. MIKE F. KIMBALL		Date of Receipt MM / DD / YYYY 10 / 20 / 2010		
	Mailing Address 106 EDGEWATER DR		Transaction ID: SA11.13944638		
	City NEW IBERIA	State LA	Zip Code 70563-1708	Amount of Each Receipt this Period 151.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
	Name of Employer RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation RETIRED Aggregate Year-to-Date ▼ 251.00		

SUBTOTAL of Receipts This Page (optional)	▶	301.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1189 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. SHERER A. KIMBELL	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 2612 HAWTHORNE DR	Transaction ID: SA11.13931905
	City State Zip Code AMARILLO TX 79109-1914	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 415.00	

B.	Full Name (Last, First, Middle Initial) WILLIAM C. KIMBELL	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 715 GILBERT HWY.	Transaction ID: SA11.13934532
	City State Zip Code FAIRFIELD CT 06824-1646	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) MR. JAMES W. KIMSEY	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 4921 MEDICAL DR.	Transaction ID: SA11.13948512
	City State Zip Code BOSSIER CITY LA 71112-4522	Amount of Each Receipt this Period 11.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 261.00	

SUBTOTAL of Receipts This Page (optional)	661.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1190 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. KAREN L. KINCANNON

Mailing Address 2375 CROWS NEST PKWY

City RENO State NV Zip Code 89519-5726

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 11 / 01 / 2010
Transaction ID: SA11.13960781
Amount of Each Receipt this Period: 110.00
CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ROBERT M. KINCAID

Mailing Address 917 HWY. 183

City CISCO State TX Zip Code 76437-5903

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED
Occupation REAL ESTATE BROKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13943412
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. PAUL A. KINDLEY

Mailing Address 7801 W 600 S

City ANDREWS State IN Zip Code 46702-9722

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt: 10 / 29 / 2010
Transaction ID: SA11.13961884
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 260.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1191 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
KIRK KINDFSATER

Mailing Address 1713 BRENTFORD

City State Zip Code
FORT COLLINS CO 80525-4704

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 520.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	4	/	2	0	1	0

Transaction ID: SA11.13930104

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KIRK KINDFSATER

Mailing Address 1713 BRENTFORD

City State Zip Code
FORT COLLINS CO 80525-4704

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 520.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	1	0

Transaction ID: SA11.13950409

Amount of Each Receipt this Period

40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. BROADUS H. KING, JR.

Mailing Address 2043 MAYFAIR MCLEAN COURT

City State Zip Code
FALLS CHURCH VA 22043-1754

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 4502.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	4	/	2	0	1	0

Transaction ID: SA11.13930621

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

1640.00

TOTAL This Period (last page this line number only) ►

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1192 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. BROADUS H. KING, JR.

Mailing Address 2043 MAYFAIR MCLEAN COURT

City State Zip Code
FALLS CHURCH VA 22043-1754

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 4502.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959675

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. DOROTHY C. KING

Mailing Address 1515 HILLCREST DR

City State Zip Code
SHERIDAN WY 82801-4037

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 355.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963880

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. EDWARD A. KING

Mailing Address 4444 TERRA GRANADA DRIVE

City State Zip Code
WALNUT CREEK CA 94595

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13964275

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1193 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOHN W. KING

Mailing Address **473 SUMMIT RIDGE ROAD**

City **LAKE TOXAWAY** State **NC** Zip Code **28747-8599**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt MM / DD / YYYY
11 / 16 / 2010

Transaction ID: SA11.13969229

Amount of Each Receipt this Period 75.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. MARY LOUISE KING

Mailing Address **13802 N 109TH. AVE**

City **SUN CITY** State **AZ** Zip Code **85351-2582**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13935343

Amount of Each Receipt this Period 50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. PATRICIA ANN KING

Mailing Address **695 STONEBROOK CT.**

City **CHESTERFIELD** State **MO** Zip Code **63005-4847**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13952014

Amount of Each Receipt this Period 10.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 135.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1194 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. RON E. KING

Mailing Address 900 BAYSHORE DR

City State Zip Code
ENGLEWOOD FL 34223-2204

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 216.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934467

Amount of Each Receipt this Period

6.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. RON E. KING

Mailing Address 900 BAYSHORE DR

City State Zip Code
ENGLEWOOD FL 34223-2204

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 216.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954492

Amount of Each Receipt this Period

20.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. RON E. KING

Mailing Address 900 BAYSHORE DR

City State Zip Code
ENGLEWOOD FL 34223-2204

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 216.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13971324

Amount of Each Receipt this Period

20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

46.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1195 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. TOMMY KING

Mailing Address PO BOX 994

City State Zip Code
ABILENE TX 79604-0994

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WESTERN TRAILER EQUIP. & MFG. INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 470.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13947844

Amount of Each Receipt this Period
220.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
WILLIAM P. KING

Mailing Address 2850 S OCEAN BLVD. APT. 502

City State Zip Code
PALM BEACH FL 33480-6248

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1321.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943852

Amount of Each Receipt this Period
241.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. KATHRYNE KINGERY

Mailing Address 2992 BONACUM DR

City State Zip Code
LINCOLN NE 68502-5724

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 369.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13971617

Amount of Each Receipt this Period
125.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **586.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1196 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. PATTY J. KINGSBURY

Mailing Address 570 POENISCH DR

City State Zip Code
CORPUS CHRISTI TX 78412-3173

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation INSURANCE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
361.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13939856

Amount of Each Receipt this Period
1.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. PATTY J. KINGSBURY

Mailing Address 570 POENISCH DR

City State Zip Code
CORPUS CHRISTI TX 78412-3173

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation INSURANCE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
361.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13940819

Amount of Each Receipt this Period
80.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MICHAEL J. KINKELAAR

Mailing Address 1722 MALDEN ST

City State Zip Code
SAN DIEGO CA 92109-2206

FEC ID number of contributing federal political committee. **C**

Name of Employer PROCOPIO, CORY, HARGREAVES & SAVIER Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13934037

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **281.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1197 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MIKE KINNAMAN	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 406 MARGUERITE AVE	Transaction ID: SA11.13949281
	City State Zip Code CUYAHOGA FLS OH 44221-1810	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00

B.	Full Name (Last, First, Middle Initial) MR. JAMES KINSINGER	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 21380 WASHINGTON RD	Transaction ID: SA11.13937379
	City State Zip Code DEER CREEK IL 61733-9436	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer SELF-EMPLOYED Occupation FARMER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 236.00

C.	Full Name (Last, First, Middle Initial) MR. JAMES KINSINGER	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 21380 WASHINGTON RD	Transaction ID: SA11.13950930
	City State Zip Code DEER CREEK IL 61733-9436	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer SELF-EMPLOYED Occupation FARMER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 236.00

SUBTOTAL of Receipts This Page (optional)	▶	260.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1198 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. EULA KIRBY		Date of Receipt
	Mailing Address 2262 JOHN KIRBY PL.		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	LENOIR	NC	28645-9086
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13956110
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Amount of Each Receipt this Period	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="15.00"/>	
Occupation INFORMATION REQUESTED PER BEST EFFORTS		CONTRIBUTION	
Aggregate Year-to-Date ▼			
<input type="text" value="256.00"/>			

B.	Full Name (Last, First, Middle Initial) MS. EULA KIRBY		Date of Receipt
	Mailing Address 2262 JOHN KIRBY PL.		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	LENOIR	NC	28645-9086
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13961317
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Amount of Each Receipt this Period	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="20.00"/>	
Occupation INFORMATION REQUESTED PER BEST EFFORTS		CONTRIBUTION	
Aggregate Year-to-Date ▼			
<input type="text" value="256.00"/>			

C.	Full Name (Last, First, Middle Initial) MS. EULA KIRBY		Date of Receipt
	Mailing Address 2262 JOHN KIRBY PL.		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	LENOIR	NC	28645-9086
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13962180
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Amount of Each Receipt this Period	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="15.00"/>	
Occupation INFORMATION REQUESTED PER BEST EFFORTS		CONTRIBUTION	
Aggregate Year-to-Date ▼			
<input type="text" value="256.00"/>			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="50.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1199 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JACK M. KIRBY

Mailing Address 3035 SADDLEBACK DR

City State Zip Code
CINCINNATI OH 45244-3820

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13955119

Amount of Each Receipt this Period
75.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. LAWRENCE L. KIRCHER

Mailing Address 3501 IVYRIDGE DR.

City State Zip Code
CHESTER VA 23831-4953

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
U.S. GOVT. CONTRACT SPECIALIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2010

Transaction ID: SA11.13962729

Amount of Each Receipt this Period
85.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. ROSEMARIE KIRCHHOEFER

Mailing Address 10011 CHARDIN WAY UNIT 1

City State Zip Code
SAINT LOUIS MO 63128-2157

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 346.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13941743

Amount of Each Receipt this Period
21.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

181.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1200 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. CONSTANCE S. KIRK

Mailing Address 234 LEROY AVE

City State Zip Code
WARWICK RI 02889-6232

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED BUS. OWNER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13932394

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. LEONARD M. KIRK

Mailing Address 6 HUNTER DR

City State Zip Code
BEL AIR MD 21014-3934

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1010.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939749

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. LEONARD M. KIRK

Mailing Address 6 HUNTER DR

City State Zip Code
BEL AIR MD 21014-3934

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1010.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13969216

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

300.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1201 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. FREDERICK S. KIRKPATRICK

Mailing Address 3930 WATERLAND DR

City METAMORA State MI Zip Code 48455-9623

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 19 / 2010

Transaction ID: SA11.13942496

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KAREN KIRKSEY

Mailing Address 13924 KING GEORGE WAY

City UPPER MARLBORO State MD Zip Code 20772-5950

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt 11 / 08 / 2010

Transaction ID: SA11.13966516

Amount of Each Receipt this Period 100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT KIRKWOOD

Mailing Address 12525 FAIRMONT DR

City FORT MYERS State FL Zip Code 33913-2618

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 29 / 2010

Transaction ID: SA11.13961321

Amount of Each Receipt this Period 100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1200.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1202 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CHRISTOPHER A. KIRSH

Mailing Address 7891 N WADE SPRINGS DR

City State Zip Code
TUCSON AZ 85743-6008

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	1	0

Transaction ID: SA11.13949008

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. BEVERLY A. KIRSTEIN

Mailing Address 8950 LEMONA AVE

City State Zip Code
NORTH HILLS CA 91343-5513

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
540.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	1	0

Transaction ID: SA11.13948708

Amount of Each Receipt this Period
30.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. BEVERLY A. KIRSTEIN

Mailing Address 8950 LEMONA AVE

City State Zip Code
NORTH HILLS CA 91343-5513

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
540.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	1	0

Transaction ID: SA11.13962949

Amount of Each Receipt this Period
60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **115.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1203 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. CAROL A. KIRTLEY

Mailing Address 1 DUARTE COURT

City State Zip Code
NOVATO CA 94949-6616

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EXCEL REAL ESTATE REAL ESTATE BROKER

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13960195

Amount of Each Receipt this Period
60.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. EVELYN J. KITCHEN

Mailing Address 9101 PARK DR

City State Zip Code
SHREVE OH 44676-9700

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944026

Amount of Each Receipt this Period
60.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MARK A. KITCHIN

Mailing Address 519 INDUSTRIAL PKWY

City State Zip Code
RICHMOND IN 47374-7941

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS SALES

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 431.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934301

Amount of Each Receipt this Period
51.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **171.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1204 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. GLADYS KJELLERSON		Date of Receipt
	Mailing Address 2504 SMITH AVE		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	RAPID CITY	SD	57701-5895
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13954671
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Amount of Each Receipt this Period	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		40.00	
Occupation INFORMATION REQUESTED PER BEST EFFORTS		CONTRIBUTION	
Aggregate Year-to-Date ▼		415.00	

B.	Full Name (Last, First, Middle Initial) CAROLYN A. KLAKA		Date of Receipt
	Mailing Address 5600 ROSALIE DR		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	WACO	TX	76708-5698
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13933287
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Amount of Each Receipt this Period	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		151.00	
Occupation INFORMATION REQUESTED PER BEST EFFORTS		CONTRIBUTION	
Aggregate Year-to-Date ▼		251.00	

C.	Full Name (Last, First, Middle Initial) MR. DAVID L. KLAUDER		Date of Receipt
	Mailing Address 3427 TURNBERRY CT		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	GARNET VALLEY	PA	19060-6832
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13960779
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Amount of Each Receipt this Period	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		80.00	
Occupation INFORMATION REQUESTED PER BEST EFFORTS		CONTRIBUTION	
Aggregate Year-to-Date ▼		320.00	

SUBTOTAL of Receipts This Page (optional)	271.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1205 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ROBERT D. KLAUS

Mailing Address 18627 SURREYWOOD

City State Zip Code
SAN ANTONIO TX 78258-4480

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AT&T MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 19 / 2010

Transaction ID: SA11.13940977

Amount of Each Receipt this Period
70.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BRIAN KLEEN

Mailing Address 1215 NOTON CT.

City State Zip Code
PFLUGERVILLE TX 78660-3805

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
KING TIGER TECHNOLOGY INC. HARDWARE DESIGNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 435.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 18 / 2010

Transaction ID: SA11.13935342

Amount of Each Receipt this Period
35.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. FRED KLEIBACKER

Mailing Address 16 RIDGE POINTE LANE

City State Zip Code
FREDERICKSBURG VA 22405-2745

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
IMTS, LLC CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 09 / 2010

Transaction ID: SA11.13966558

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1105.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1206 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. ALICE KLEIN

Mailing Address 48 ROCKLEDGE DR

City State Zip Code
LIVINGSTON NJ 07039-1902

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939163

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GEORGE KLEIN

Mailing Address 499 PARK AVENUE, 27TH FLOOR
499 PARK AVE, 27TH FLOOR

City State Zip Code
NEW YORK NY 10022-1240

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PARK TOWER GROUP CHAIRMAN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 20000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13945231

Amount of Each Receipt this Period
20000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. SYLVIA K. KLEIN

Mailing Address 855 OAKHAVEN DR.

City State Zip Code
ROSWELL GA 30075-1248

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 301.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936810

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 20125.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1207 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. SYLVIA K. KLEIN		Date of Receipt
	Mailing Address 855 OAKHAVEN DR.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 10 19 2010
	City	State	Zip Code
	ROSWELL	GA	30075-1248
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13939239
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 40.00
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MR. THOMAS KLEIN		Date of Receipt
	Mailing Address 20824 HILLMOOR DRIVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 10 19 2010
	City	State	Zip Code
	SARATOGA	CA	95070-3002
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13931807
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 30.00
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MRS. YARMILA KLESKEN		Date of Receipt
	Mailing Address 2508 PARK AVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 10 26 2010
	City	State	Zip Code
	RIVERSIDE	IL	60546-1537
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13956528
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 45.00
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 115.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1208 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ALFRED H. KLETT

Mailing Address 5407 OAK STONE LANE

City State Zip Code
FAIR OAKS CA 95628-4126

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 430.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928489

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JAMES KLINGERMAN

Mailing Address 20229 COUNTRY CLUB DR

City State Zip Code
ESTERO FL 33928-2003

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951547

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. COLETTA A. KLUG

Mailing Address 138 OVERBROOK AVE

City State Zip Code
TONAWANDA NY 14150-8303

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946671

Amount of Each Receipt this Period
75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **225.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1209 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. COLETTA A. KLUG

Mailing Address 138 OVERBROOK AVE

City State Zip Code
TONAWANDA NY 14150-8303

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949034

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. HERBERT H. KLUG

Mailing Address 5156 NORTHCREST DRIVE

City State Zip Code
FORT WAYNE IN 46825-5633

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 1 0

Transaction ID: SA11.13972323

Amount of Each Receipt this Period
20.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DUTCH KLUGE

Mailing Address 13824 HASTINGS FARM RD

City State Zip Code
HUNTERSVILLE NC 28078-7452

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931862

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 120.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1210 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) LT. COL. DONALD J. KLUK	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 4049 VALLEY WEST DR.	Transaction ID: SA11.13943926
	City State Zip Code RAPID CITY SD 57702-3158	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

B.	Full Name (Last, First, Middle Initial) LT. COL. DONALD J. KLUK	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 4049 VALLEY WEST DR.	Transaction ID: SA11.13949274
	City State Zip Code RAPID CITY SD 57702-3158	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

C.	Full Name (Last, First, Middle Initial) MR. JAMES A. KLUNGNESS	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 10040 E HAPPY VALLEY RD UNIT 5	Transaction ID: SA11.13947791
	City State Zip Code SCOTTSDALE AZ 85255-2340	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional)	▶	200.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1211 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. MILTON J. H. KNABUSCH	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 660 HOLLYWOOD DRIVE	Transaction ID: SA11.13940390
	City State Zip Code MONROE MI 48162-7814	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

B.	Full Name (Last, First, Middle Initial) DR. PETER KNAPP	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 1801 SENATE BLVD STE 655	Transaction ID: SA11.13957704
	City State Zip Code INDIANAPOLIS IN 46202-1259	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer UROLOGY OF INDIANA	Occupation PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3400.00	

C.	Full Name (Last, First, Middle Initial) MR. RICHARD G. KNAPP	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 1400 N. DRAKE ROAD APARTMENT 177	Transaction ID: SA11.13957609
	City State Zip Code KALAMAZOO MI 49006-1969	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 495.00	

SUBTOTAL of Receipts This Page (optional)	250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1212 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. ROBERT N. KNAPP	Date of Receipt MM / DD / YYYY 11 / 02 / 2010
	Mailing Address 36935 PELICAN LAKE RD	Transaction ID: SA11.13962580
	City State Zip Code AVON MN 56310-4604	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

B.	Full Name (Last, First, Middle Initial) MR. F. D. KNEIBERT	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 517 SOUTH BEACON AVENUE	Transaction ID: SA11.13930385
	City State Zip Code SEDALIA MO 65301-3936	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	

C.	Full Name (Last, First, Middle Initial) MR. BRUCE I. KNIGHT	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 3805 KEITH AVENUE	Transaction ID: SA11.13928413
	City State Zip Code FAIRFAX VA 22030-3117	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer STRATEGIC CONSERVATION SOLUTIONS LLC	Occupation CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	1200.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1213 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES S. KNIGHT

Mailing Address 263 S CLUBHOUSE DR UNIT 105
UNIT 105

City PALATINE State IL Zip Code 60074-6436

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 261.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13933130
Amount of Each Receipt this Period: 201.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JESSIE J. KNIGHT, JR.

Mailing Address 404 SAN ANTONIO AVE UNIT F

City SAN DIEGO State CA Zip Code 92106-3534

FEC ID number of contributing federal political committee. **C**

Name of Employer SEMPRA ENERGY Occupation ENERGY CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13941564
Amount of Each Receipt this Period: 101.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PHILIP H. KNIGHT

Mailing Address ONE BOWERMAN DRIVE

City BEAVERTON State OR Zip Code 97005-0979

FEC ID number of contributing federal political committee. **C**

Name of Employer NIKE, INC. Occupation CHAIRMAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt: 10 / 27 / 2010
Transaction ID: SA11.13959348
Amount of Each Receipt this Period: 30400.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 30702.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1214 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. SAMUEL E. KNIGHTON

Mailing Address 16780 OLD WATERFORD RD

City State Zip Code
PAEONIAN SPRINGS VA 20129-1852

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951595

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. VENIS D. KNIGHT

Mailing Address 53 MOUNTAINVIEW AVE

City State Zip Code
NYACK NY 10960-1709

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
RETIRED

Aggregate Year-to-Date ▼
294.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944053

Amount of Each Receipt this Period

11.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. VENIS D. KNIGHT

Mailing Address 53 MOUNTAINVIEW AVE

City State Zip Code
NYACK NY 10960-1709

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
RETIRED

Aggregate Year-to-Date ▼
294.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13969159

Amount of Each Receipt this Period

22.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

183.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1215 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. VENIS D. KNIGHT

Mailing Address 53 MOUNTAINVIEW AVE

City NYACK State NY Zip Code 10960-1709

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 294.00

Date of Receipt 11 / 16 / 2010

Transaction ID: SA11.13969194

Amount of Each Receipt this Period 1.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DAVID MAURICE KNIZE

Mailing Address 112 MAYHURST AVE

City COLORADO SPGS State CO Zip Code 80906-3056

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 26 / 2010

Transaction ID: SA11.13957093

Amount of Each Receipt this Period 200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RONALD B. KNODE

Mailing Address 2444 HIGHTEE COURT

City CROFTON State MD Zip Code 21114-2551

FEC ID number of contributing federal political committee. **C**

Name of Employer COMPUTER SCIENCES CORP Occupation COMPUTER SYSTEMS ANALYST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt 10 / 19 / 2010

Transaction ID: SA11.13941623

Amount of Each Receipt this Period 26.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 227.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1216 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RONALD B. KNODE

Mailing Address 2444 HIGHTEE COURT

City State Zip Code
CROFTON MD 21114-2551

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
COMPUTER SCIENCES CORP COMPUTER SYSTEMS ANALYST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942953

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RICHARD L. KNOEBEL

Mailing Address 206 KNOEBELS BLVD.

City State Zip Code
ELYSBURG PA 17824-7125

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963523

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. EDDIE KNOELL

Mailing Address 6415 S. 65TH DR.

City State Zip Code
LAVEEN AZ 85339-9670

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SMALL BUSINESS OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951327

Amount of Each Receipt this Period
185.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **310.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1217 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. DAVID J. KNOLL	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 14022 HEATHER ST NW	Transaction ID: SA11.13951556
	City State Zip Code ANDOVER MN 55304-7547	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00

B.	Full Name (Last, First, Middle Initial) MR. LESTER KNOP	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 400 POPLAR PLACE	Transaction ID: SA11.13955325
	City State Zip Code MOUNT JULIET TN 37122-2704	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00

C.	Full Name (Last, First, Middle Initial) MRS. VIRGINIA KNOTT	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 232 CLEFT ROAD	Transaction ID: SA11.13961179
	City State Zip Code MILL NECK NY 11765-1001	Amount of Each Receipt this Period 10000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS HOMEMAKER		Occupation INFORMATION REQUESTED PER BEST EFFORTS HOMEMAKER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 10000.00

SUBTOTAL of Receipts This Page (optional)	▶	10240.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1218 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. DORIS M. KNOX	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 23144 S SHORE DR.	Transaction ID: SA11.13934210
	City State Zip Code EDWARDSBURG MI 49112-8502	Amount of Each Receipt this Period 1.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00	

B.	Full Name (Last, First, Middle Initial) MR. WILLIAM H. KNOX, III	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 5 CARRIAGE HILL	Transaction ID: SA11.13936952
	City State Zip Code NASHVILLE TN 37205-3315	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

C.	Full Name (Last, First, Middle Initial) MRS. ABIGAIL Y. KOCH	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 6301 RAINWOOD RD	Transaction ID: SA11.13957118
	City State Zip Code OMAHA NE 68152-1609	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional)	301.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1219 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. ANNA B. KOCH

Mailing Address 550 NORTH HILLSIDE

City State Zip Code
WICHITA KS 67214-4910

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WESLEY MEDICAL CENTER NURSE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13932336

Amount of Each Receipt this Period
30400.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. CHARLES KOCH

Mailing Address PO BOX 51867

City State Zip Code
MIDLAND TX 79710-1867

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Transaction ID: SA11.13967696

Amount of Each Receipt this Period
600.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
ELIZABETH KOCH

Mailing Address PO BOX 2256

City State Zip Code
WICHITA KS 67201-2256

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13961176

Amount of Each Receipt this Period
30400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **61400.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1220 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JOHN L. KOCH

Mailing Address P.O. BOX 39

City State Zip Code
NEW SUMMERFIELD TX 75780-0039

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED FARMER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933538

Amount of Each Receipt this Period
75.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JAMES C. KOCIAN

Mailing Address 12204 LONGMEAD AVENUE

City State Zip Code
CLEVELAND OH 44135-3054

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 378.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951340

Amount of Each Receipt this Period
105.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. EDWARD A. KOECHLE

Mailing Address 5411 CONCORD ST.

City State Zip Code
BOSSIER CITY LA 71111-5505

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 361.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930815

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **220.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1221 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. EDWARD A. KOECHLE

Mailing Address 5411 CONCORD ST.

City State Zip Code
BOSSIER CITY LA 71111-5505

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 361.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936653

Amount of Each Receipt this Period
1.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. EDWARD A. KOECHLE

Mailing Address 5411 CONCORD ST.

City State Zip Code
BOSSIER CITY LA 71111-5505

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 361.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941227

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ELLEN L. KOEHLER

Mailing Address 72066 617 AVE

City State Zip Code
TECUMSEH NE 68450-2718

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
COMMUNITY HOSPITAL REGISTERED NURSE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929223

Amount of Each Receipt this Period
20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **46.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1222 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MADELINE PAULINE KOEHLER

Mailing Address 4590 SUNSHINE CANYON DR.

City State Zip Code
BOULDER CO 80302-8751

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918471

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. DAVID KOENEN

Mailing Address P.O. BOX 486

City State Zip Code
LATIMER IA 50452-0486

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933092

Amount of Each Receipt this Period
26.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. DAVID KOENEN

Mailing Address P.O. BOX 486

City State Zip Code
LATIMER IA 50452-0486

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949248

Amount of Each Receipt this Period
75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **151.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1223 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. WILLIAM L. KOESTER	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 10405 OLD PLANTATION DRIVE	Transaction ID: SA11.13940833
	City State Zip Code EVANSVILLE IN 47725-7136	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

B.	Full Name (Last, First, Middle Initial) MR. PAUL O. KOETHER	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 6808 MYSTIC WOODS LANE	Transaction ID: SA11.13939835
	City State Zip Code COLLEYVILLE TX 76034-6563	Amount of Each Receipt this Period 1.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer T.R. WINSTON & COLLC	Occupation STOCK BROKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1241.00	

C.	Full Name (Last, First, Middle Initial) MR. PAUL O. KOETHER	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 6808 MYSTIC WOODS LANE	Transaction ID: SA11.13940825
	City State Zip Code COLLEYVILLE TX 76034-6563	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer T.R. WINSTON & COLLC	Occupation STOCK BROKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1241.00	

SUBTOTAL of Receipts This Page (optional)	751.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1224 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
CHARLES KOHLERMAN
Mailing Address 409 MELVIN DR.

City State Zip Code
BROOKHAVEN PA 19015-1511

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 635.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931554

Amount of Each Receipt this Period
150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. MICHAEL KOLANSKY
Mailing Address 6419 MELSTONE CT

City State Zip Code
CLIFTON VA 20124-2437

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935528

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. LOIS LORRAINE KOLDEWEY
Mailing Address 333 GOLF CT.

City State Zip Code
SANTA ROSA CA 95409-6320

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 530.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13962043

Amount of Each Receipt this Period
15.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

265.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1225 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. LEONARD S. KOMOR	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 6380 CHATTSWOOD DR	Transaction ID: SA11.13947842
	City State Zip Code MARTINEZ CA 94553-6051	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 253.00	

B.	Full Name (Last, First, Middle Initial) MR. EDWARD KONIG	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 8246 135TH ST. APT. 2V	Transaction ID: SA11.13947843
	City State Zip Code JAMAICA NY 11435-1425	Amount of Each Receipt this Period 160.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

C.	Full Name (Last, First, Middle Initial) MS. BARBARA T. KONO	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 87481 AVE 74	Transaction ID: SA11.13942576
	City State Zip Code THERMAL CA 92274	Amount of Each Receipt this Period 110.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 820.00	

SUBTOTAL of Receipts This Page (optional)	345.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1226 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
WM K. KONZE

Mailing Address 7318 RIVERHILL RD

City State Zip Code
OXON HILL MD 20745-1031

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956320

Amount of Each Receipt this Period
120.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. JANET E. KOPKA

Mailing Address 2755 M 119

City State Zip Code
HARBOR SPGS MI 49740

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933330

Amount of Each Receipt this Period
101.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. BRIAN KOPP

Mailing Address 401 9TH STREET, NW
SUITE 900

City State Zip Code
WASHINGTON DC 20004-2145

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NIXON & PEABODY ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 0 / 2 0 1 0

Transaction ID: SA11.13968708

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **721.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1227 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. RAJ KORDE

Mailing Address 3418 S PATTON AVE

City State Zip Code
SAN PEDRO CA 90731-6030

FEC ID number of contributing federal political committee. **C**

Name of Employer IRD Occupation ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13950006
Amount of Each Receipt this Period: 800.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM KORNITZER

Mailing Address 400 W 49TH TER

City State Zip Code
KANSAS CITY MO 64112

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt: 10 / 29 / 2010
Transaction ID: SA11.13961324
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. MARY ANN KORNYE

Mailing Address 1816 CARLETON AVENUE

City State Zip Code
FORT WORTH TX 76107-3814

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation ART DEALER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt: 11 / 08 / 2010
Transaction ID: SA11.13967167
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 950.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1228 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. FRANK E. KOS

Mailing Address 63 HAVERHILL DRIVE

City State Zip Code
JACKSON TN 38305-8505

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 18 / 2010

Transaction ID: SA11.13934628

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ELNA KOTZUR

Mailing Address 1703 HICKORY ST.

City State Zip Code
FLORESVILLE TX 78114-2535

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 25 / 2010

Transaction ID: SA11.13952446

Amount of Each Receipt this Period
60.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PANOS C. KOUTLAS

Mailing Address 5710 94TH PL SW

City State Zip Code
MUKILTEO WA 98275-3652

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 751.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2010

Transaction ID: SA11.13943634

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 260.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1229 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
PANOS C. KOUTLAS

Mailing Address 5710 94TH PL SW

City State Zip Code
MUKILTEO WA 98275-3652

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 751.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13947125

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DEMETRIOS KOUZOUKAS

Mailing Address 6177 VINE FOREST COURT

City State Zip Code
FALLS CHURCH VA 22044-1831

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
COVINGTON & BURLING LLP ATTORNEY

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955919

Amount of Each Receipt this Period

300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DR. PEGGY L. KOVACH

Mailing Address 858 SURREY HILL CT.

City State Zip Code
GREENWOOD IN 46142-2059

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AMERICAN HEALTH NETWORK PHYSICIAN

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 201.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952316

Amount of Each Receipt this Period

101.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

501.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1230 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ALAN R. KOXLIEN

Mailing Address 9098 COMFORT LN NW

City State Zip Code
BREMERTON WA 98311-9080

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt: 10 / 14 / 2010
Transaction ID: SA11.13918663
Amount of Each Receipt this Period: 60.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RAYMOND KOZIELEK

Mailing Address 2741 HARVEY PL APT 118

City State Zip Code
GRANITE CITY IL 62040-4207

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1410.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13946875
Amount of Each Receipt this Period: 300.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RAYMOND KOZIELEK

Mailing Address 2741 HARVEY PL APT 118

City State Zip Code
GRANITE CITY IL 62040-4207

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1410.00

Date of Receipt: 11 / 04 / 2010
Transaction ID: SA11.13965164
Amount of Each Receipt this Period: 160.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 520.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1231 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DANIEL A. KRAFT

Mailing Address 19330 WINESAP RD.
UNIT 4

City State Zip Code
BOTHELL WA 98012-7040

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948540

Amount of Each Receipt this Period
76.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RICHARD W. KRAJICEK

Mailing Address 244 MEDICINE BOW RD

City State Zip Code
ASPEN CO 81611-9616

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944549

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RICHARD WILLIAM KRAJICEK

Mailing Address 4944 WOODWAY DR APT 2

City State Zip Code
HOUSTON TX 77056-1815

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 451.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939030

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 176.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1232 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) RICHARD WILLIAM KRAJICEK		Date of Receipt
	Mailing Address 4944 WOODWAY DR APT 2		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 10 / 19 / 2010
	City	State	Zip Code
	HOUSTON	TX	77056-1815
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13939826
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 451.00	<input type="text"/> 1.00
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) RICHARD WILLIAM KRAJICEK		Date of Receipt
	Mailing Address 4944 WOODWAY DR APT 2		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 10 / 19 / 2010
	City	State	Zip Code
	HOUSTON	TX	77056-1815
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13940971
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 451.00	<input type="text"/> 50.00
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MR. JOHN ALFRED KRAMM		Date of Receipt
	Mailing Address 828 LYONS AVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 10 / 19 / 2010
	City	State	Zip Code
	ELY	NV	89301-1538
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13940485
Name of Employer SELF-EMPLOYED		Occupation SCHOOL BUS DRIVER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 246.00	<input type="text"/> 30.00
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 81.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1233 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. KENNETH KRANZ	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 1 0
	Mailing Address 11 HAWTHORNE CIR	Transaction ID: SA11.13947210
	City State Zip Code GENESEO NY 14454-1196	Amount of Each Receipt this Period 55.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

B.	Full Name (Last, First, Middle Initial) MR. CHARLES ROBERT KRAUSE	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 1 0
	Mailing Address 4615 RADER PASS	Transaction ID: SA11.13946058
	City State Zip Code SAN ANTONIO TX 78247-5816	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.00	

C.	Full Name (Last, First, Middle Initial) MR. DONALD KRAUSE	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 1 0
	Mailing Address 22710 CRANBERRY TRL	Transaction ID: SA11.13951611
	City State Zip Code SPRING TX 77373-6428	Amount of Each Receipt this Period 230.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer BAKER HUGHES INC	Occupation QUALITY ASSURANCE MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 490.00	

SUBTOTAL of Receipts This Page (optional)	310.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1234 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. SUZANNE S. KRAUS

Mailing Address 1685 S SHORE E

City State Zip Code
FRANKFORT MI 49635-9547

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
11 / 19 / 2010

Transaction ID: SA11.13971092

Amount of Each Receipt this Period
60.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
EDWARD C. KREBS, JR.

Mailing Address 615 LAGUNA DR.

City State Zip Code
VENICE FL 34285-1313

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt
MM / DD / YYYY
10 / 20 / 2010

Transaction ID: SA11.13944143

Amount of Each Receipt this Period
1.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
EDWARD C. KREBS, JR.

Mailing Address 615 LAGUNA DR.

City State Zip Code
VENICE FL 34285-1313

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt
MM / DD / YYYY
10 / 20 / 2010

Transaction ID: SA11.13944495

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **86.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1235 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. DAN FORREST KREIDER

Mailing Address 7930 PARK HILL DR

City State Zip Code
FORT COLLINS CO 80528-8932

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BANNER HEALTH PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2010

Transaction ID: SA11.13962732

Amount of Each Receipt this Period
125.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RONALD J. KREJCI

Mailing Address 6410 CONCORD CIR.

City State Zip Code
LINCOLN NE 68516-3337

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FIRST STATE BANK COMMERCIAL BANKING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13939347

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. STEFAN KREUZER

Mailing Address 1140 BUSINESS CENTER DRIVE
SUITE 101

City State Zip Code
HOUSTON TX 77043-2740

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
10 / 28 / 2010

Transaction ID: SA11.13958241

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 2650.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1236 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. ANNA KRITIS

Mailing Address 1956 WOODDED RIDGE CT

City State Zip Code
FOGELSVILLE PA 18051-1735

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
301.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13939702

Amount of Each Receipt this Period
101.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. ANNA KRITIS

Mailing Address 1956 WOODDED RIDGE CT

City State Zip Code
FOGELSVILLE PA 18051-1735

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
301.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13951874

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ALLYN J. KROLL

Mailing Address 4193 48TH AVE

City State Zip Code
HUDSONVILLE MI 49426-9408

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13952150

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **226.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1237 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CHRIS KRUEGER

Mailing Address 1055 THOMAS JEFFERSON ST., NW
SUITE 450

City State Zip Code
WASHINGTON DC 20007-5260

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CONCEPT CAPITAL VICE PRESIDENT

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
10 / 29 / 2010

Transaction ID: SA11.13959401

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. MARGARET J. KRUEGER

Mailing Address 614 CASTANO AVE

City State Zip Code
SAN ANTONIO TX 78209-3617

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
370.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2010

Transaction ID: SA11.13962711

Amount of Each Receipt this Period
120.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. COURTNEY T. KRUGER

Mailing Address 1878 SPRING LANE

City State Zip Code
SALT LAKE CITY UT 84117-6971

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
211.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13933140

Amount of Each Receipt this Period
26.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **196.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1238 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. LESTER F. KRUPP	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 4151 GULF SHORE BLVD. N # 40	Transaction ID: SA11.13930073
	City State Zip Code NAPLES FL 34103-2292	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) DOUGLAS C. KRUSE	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 12 PIERREPONT ST.	Transaction ID: SA11.13946879
	City State Zip Code BROOKLYN NY 11201-3303	Amount of Each Receipt this Period 80.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

C.	Full Name (Last, First, Middle Initial) MARIA R. KRUSEMAN	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 12861 NIGHTINGALE ST NW	Transaction ID: SA11.13939248
	City State Zip Code MINNEAPOLIS MN 55448-7028	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation GLC/ST LOUIS RECREATION SPECIALIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional)	▶	125.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1239 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MARIA R. KRUSEMAN	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 12861 NIGHTINGALE ST NW	Transaction ID: SA11.13956487
	City State Zip Code MINNEAPOLIS MN 55448-7028	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation GLC/ST LOUIS RECREATION SPECIALIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

B.	Full Name (Last, First, Middle Initial) MR. HAROLD KUEBLER	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 2 ANNANDALE ROAD	Transaction ID: SA11.13938956
	City State Zip Code CHAPPAQUA NY 10514-1802	Amount of Each Receipt this Period 1.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 227.00	

C.	Full Name (Last, First, Middle Initial) MRS. ONETA G. KUECHER	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 7460 GRAND AVENUE APARTMENT 106	Transaction ID: SA11.13965245
	City State Zip Code DOWNERS GROVE IL 60516-4169	Amount of Each Receipt this Period 90.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

SUBTOTAL of Receipts This Page (optional)	▶	116.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1240 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. KEITH H. KUHLMAN	Date of Receipt MM / DD / YYYY 11 / 02 / 2010
	Mailing Address 949 BAY ESPLANADE	Transaction ID: SA11.13962702
	City State Zip Code CLEARWATER FL 33767-1002	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00

B.	Full Name (Last, First, Middle Initial) MR. DONALD L. KUMMER	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 898 WHITMOOR DRIVE	Transaction ID: SA11.13952740
	City State Zip Code WELDON SPRING MO 63304-0503	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 205.00

C.	Full Name (Last, First, Middle Initial) MR. JOSEPH T. KUNG	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 20866 QUAIL RUN DR.	Transaction ID: SA11.13931479
	City State Zip Code WALNUT CA 91789-4034	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SIGNAL INVESTMENT INT'L CORP. Occupation REAL ESTATE DEVELOPER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00

SUBTOTAL of Receipts This Page (optional)	2750.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1241 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOSEPH T. KUNG

Mailing Address 20866 QUAIL RUN DR.

City State Zip Code
WALNUT CA 91789-4034

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SIGNAL INVESTMENT INT'L REAL ESTATE DEVELOPER
CORP.

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13955982

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM J. KUPERSMITH

Mailing Address 3924 VALENTIA WAY

City State Zip Code
NAPLES FL 34119-7513

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940790

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM J. KUPERSMITH

Mailing Address 3924 VALENTIA WAY

City State Zip Code
NAPLES FL 34119-7513

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954539

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 2700.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1242 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
M KUPPUSAMI

Mailing Address 109 WINDSOR CIR

City State Zip Code
BLUEFIELD VA 24605-9324

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	1	0

Transaction ID: SA11.13928713

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. BRIAN P. KURTH

Mailing Address 2203 LOSEKAMP ST

City State Zip Code
BILLINGS MT 59102-2344

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1510.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	9	/	2	0	1	0

Transaction ID: SA11.13959102

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. LOUIS KURTH

Mailing Address 420 TURTLE BAY CT SE

City State Zip Code
SALEM OR 97306-9029

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	1	0

Transaction ID: SA11.13945349

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

1150.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1243 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. PETER KURTZ	Date of Receipt MM / DD / YYYY 11 / 18 / 2010
	Mailing Address 245 MAIN ST STE 120	Transaction ID: SA11.13969746
	City State Zip Code WHITE PLAINS NY 10601-2425	Amount of Each Receipt this Period 235.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SELF-EMPLOYED PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	

B.	Full Name (Last, First, Middle Initial) MR. MICHAEL KURZ	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 1406 BOBBINS RDG.	Transaction ID: SA11.13955817
	City State Zip Code SAN ANTONIO TX 78260-6291	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

C.	Full Name (Last, First, Middle Initial) MR. ROBERT E. KUSCH	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 540 SEA OAK DR	Transaction ID: SA11.13953656
	City State Zip Code VERO BEACH FL 32963-3247	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional)	410.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1244 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. THOMAS M. KUZMICH	Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 1 0
	Mailing Address 406 N MAIN ST	Transaction ID: SA11.13957687
	City MIDLAND State TX Zip Code 79701-4710	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1140.00	

B.	Full Name (Last, First, Middle Initial) JAY KVILVANG	Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0
	Mailing Address 2830 N LLOYD BUSH DR.	Transaction ID: SA11.13950668
	City TUCSON State AZ Zip Code 85745-9527	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer EMADI INC	Occupation RETAIL SALES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) MRS. ADDIE S. KYKER	Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 1 0
	Mailing Address 2146 SWOOPE DR	Transaction ID: SA11.13959575
	City NEW SMYRNA BEACH State FL Zip Code 32168-8575	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 526.00	

SUBTOTAL of Receipts This Page (optional)	▶	180.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1245 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. KEITH C. KYLE

Mailing Address 12271 23RD ST E

City PARRISH State FL Zip Code 34219-6901

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13931719
 Amount of Each Receipt this Period: 100.00
CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
CHRIS KYRIAKEDES

Mailing Address 2114 LONGFELLOW ST. NE

City CANTON State OH Zip Code 44721-3800

FEC ID number of contributing federal political committee. **C**

Name of Employer GEMS Occupation EMERGENCY PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13939798
 Amount of Each Receipt this Period: 75.00
CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JAMES PARKER LABACH

Mailing Address 10002 W 121ST ST

City OVERLAND PARK State KS Zip Code 66213-1638

FEC ID number of contributing federal political committee. **C**

Name of Employer PHYSICIANS REFERENCE LAB Occupation PATHOLOGIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13954853
 Amount of Each Receipt this Period: 100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **275.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1246 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DR. SALVADOR LACAYO

Mailing Address 7618 FERNBROOK LN.

City State Zip Code
HOUSTON TX 77070-3721

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 221.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943629

Amount of Each Receipt this Period

20.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DR. SALVADOR LACAYO

Mailing Address 7618 FERNBROOK LN.

City State Zip Code
HOUSTON TX 77070-3721

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 221.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961593

Amount of Each Receipt this Period

21.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ANDRE B. LACY

Mailing Address 54 MONUMENT CIRCLE
STE. 800

City State Zip Code
INDIANAPOLIS IN 46204

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LDI, LTD. EXECUTIVE

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 2200.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 1 0

Transaction ID: SA11.13883383B

Amount of Each Receipt this Period

-2200.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO RECOUNT FUND

SUBTOTAL of Receipts This Page (optional) ▶

41.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1247 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. PHILIP H. LACY

Mailing Address 44 POPLAR AVENUE

City State Zip Code
SHALIMAR FL 32579-1129

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938597

Amount of Each Receipt this Period

35.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. WALTER E. LADWIG

Mailing Address 4200 W RIVERS EDGE CIR
UNIT 13

City State Zip Code
BROWN DEER WI 53209-1141

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 285.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962718

Amount of Each Receipt this Period

75.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. CHARLES PAT LAFF

Mailing Address 117 CLUB COURSE DRIVE

City State Zip Code
HILTON HEAD ISLAND SC 29928-3126

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961874

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

210.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1248 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. CHARLES PAT LAFF

Mailing Address 117 CLUB COURSE DRIVE

City State Zip Code
HILTON HEAD ISLAND SC 29928-3126

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
201.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961911

Amount of Each Receipt this Period

1.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. BROCK L. LAFFOON

Mailing Address 480 E NICOLE LN

City State Zip Code
SHELTON WA 98584-7033

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
RETIRED

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13931259

Amount of Each Receipt this Period

80.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. WILLIAM L. LAGER

Mailing Address 155 W MAIN STREET
APT 1206

City State Zip Code
COLUMBUS OH 43215-5069

FEC ID number of contributing federal political committee. **C**

Name of Employer
ALTAIR LEARNING MANAGEME-
NT

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
CEO

Aggregate Year-to-Date ▼
2600.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961228

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2681.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1249 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
PHILIP A. LAGUEUX

Mailing Address 260 WELLINGTON DR.

City State Zip Code
LACONIA NH 03246-1372

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 366.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963030

Amount of Each Receipt this Period

20.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
JOSEPH LAI

Mailing Address 424 EAST CAPITOL STREET NE

City State Zip Code
WASHINGTON DC 20003-3833

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LEGISLATIVE ASSISTANT U.S. SENATE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13960644

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DAVID LAIRD

Mailing Address 10877 BELLE PLAINE BLVD

City State Zip Code
FISHERS IN 46037-7112

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 341.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13938845

Amount of Each Receipt this Period

1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

271.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1250 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DAVID LAIRD	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 10877 BELLE PLAINE BLVD	Transaction ID: SA11.13940177
	City State Zip Code FISHERS IN 46037-7112	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 341.00	

B.	Full Name (Last, First, Middle Initial) MR. EARL C. LAIRSON	Date of Receipt MM / DD / YYYY 11 / 19 / 2010
	Mailing Address P.O. BOX 924048	Transaction ID: SA11.13972039
	City State Zip Code HOUSTON TX 77292-4048	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

C.	Full Name (Last, First, Middle Initial) MR. ROBERT A. LAKE	Date of Receipt MM / DD / YYYY 11 / 17 / 2010
	Mailing Address 457 COLLEGE HWY	Transaction ID: SA11.13969939
	City State Zip Code SOUTHWICK MA 01077-9706	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional)	110.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1251 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. CHERI LALIBERTE

Mailing Address 9337 WINDHAVEN DR

City State Zip Code
PARKER CO 80134-2809

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959132

Amount of Each Receipt this Period
105.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT LALOR

Mailing Address PO BOX 478

City State Zip Code
LITTLE MEADOWS PA 18830-0478

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938580

Amount of Each Receipt this Period
110.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GIBSON LAM

Mailing Address 1930 HALF PENCE WAY

City State Zip Code
SAN JOSE CA 95132-1913

FEC ID number of contributing federal political committee. **C**

Name of Employer AMD
Occupation ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13964838

Amount of Each Receipt this Period
75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **290.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1252 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
ALVIN FRED LAMBERT

Mailing Address 14049 TUSCOLA RD.

City State Zip Code
CLIO MI 48420-8808

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 255.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954593

Amount of Each Receipt this Period

30.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MAURICE N. LAMBERT

Mailing Address 7 INNISBROOK CT

City State Zip Code
FRISCO TX 75034-6823

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LAMBERT REALTY, LLC MANAGER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13931205

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MAURICE N. LAMBERT

Mailing Address 7 INNISBROOK CT

City State Zip Code
FRISCO TX 75034-6823

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LAMBERT REALTY, LLC MANAGER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13965272

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1253 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
JEAN LAMP

Mailing Address 1504 N. FLORIDA AVE

City State Zip Code
YORK NE 68467-2134

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948746

Amount of Each Receipt this Period
20.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. COLIN LAMPARD

Mailing Address 8355 SEQUOIA WAY

City State Zip Code
FORT WORTH TX 76137-5714

FEC ID number of contributing federal political committee. **C**

Name of Employer FED X
Occupation PILOT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 1 0

Transaction ID: SA11.13928737

Amount of Each Receipt this Period
400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JOSEPH LANCE

Mailing Address ELEVEN MADISON AVENUE

City State Zip Code
NEW YORK NY 10010-3643

FEC ID number of contributing federal political committee. **C**

Name of Employer CREDIT SUISSE
Occupation FINANCE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13932252

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **920.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1254 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. JANE J. LANCTOT

Mailing Address 74 PIEDMONT STREET

City State Zip Code
SAN FRANCISCO CA 94117-4508

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
620.00

Date of Receipt
MM / DD / YYYY
11 / 15 / 2010

Transaction ID: SA11.13968857

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. RANDI B. LAND

Mailing Address 6120 ELIZABETHAN DR

City State Zip Code
NASHVILLE TN 37205-1222

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13937471

Amount of Each Receipt this Period
150.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CARMEN LANDAS

Mailing Address 242 MERMAID DR

City State Zip Code
MANAHAWKIN NJ 08050-5025

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
MM / DD / YYYY
10 / 29 / 2010

Transaction ID: SA11.13961291

Amount of Each Receipt this Period
75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **425.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1255 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. CARMEN LANDAS		Date of Receipt
	Mailing Address 242 MERMAID DR		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	MANAHAWKIN	NJ	08050-5025
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13961967
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="40.00"/>
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MR. C. FREDERICK LANDENBERGER		Date of Receipt
	Mailing Address 946 W. CAMINO GUARINA		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	GREEN VALLEY	AZ	85614-2008
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13937289
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="100.00"/>
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MR. IRVIN M. LANDE		Date of Receipt
	Mailing Address 6474 DWANE AVENUE		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	SAN DIEGO	CA	92120-3925
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13954872
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="150.00"/>
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="290.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1256 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. LOUIS F. LANDINI

Mailing Address 208 FOREST PARK DRIVE

City State Zip Code
PACIFICA CA 94044-1009

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MILLBRAE CALIFORNIA POLICE POLICE INSPECTOR
DEPT.

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935255

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LOUIS F. LANDINI

Mailing Address 208 FOREST PARK DRIVE

City State Zip Code
PACIFICA CA 94044-1009

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MILLBRAE CALIFORNIA POLICE POLICE INSPECTOR
DEPT.

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954377

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. LOUIS F. LANDINI

Mailing Address 208 FOREST PARK DRIVE

City State Zip Code
PACIFICA CA 94044-1009

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MILLBRAE CALIFORNIA POLICE POLICE INSPECTOR
DEPT.

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 1 0

Transaction ID: SA11.13968800

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 150.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1257 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RICHARD LONDON

Mailing Address 109 LAKE DR

City State Zip Code
WILLIAMSBURG VA 23185-3112

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt
MM / DD / YYYY
10 / 27 / 2010

Transaction ID: SA11.13958285

Amount of Each Receipt this Period
150.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RICHARD LONDON

Mailing Address 109 LAKE DR

City State Zip Code
WILLIAMSBURG VA 23185-3112

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt
MM / DD / YYYY
11 / 05 / 2010

Transaction ID: SA11.13966241

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. CAROLYN KENNETH LANDRUM

Mailing Address 520 E HOUSTON AVE

City State Zip Code
MCALLEN TX 78501-9021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
10 / 29 / 2010

Transaction ID: SA11.13961958

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 240.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1258 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RENE PATRICK LANDRY

Mailing Address 219 BRICK ST.

City State Zip Code
BREAUX BRIDGE LA 70517-4913

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MCMUOLDS MAINTANANCE MAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 567.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943763

Amount of Each Receipt this Period
26.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. ILONA LANEY

Mailing Address 133 LANTANA DRIVE

City State Zip Code
KENNETT SQUARE PA 19348-1568

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13957680

Amount of Each Receipt this Period
110.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. ILONA I. LANEY

Mailing Address 133 LANTANA DRIVE

City State Zip Code
KENNETT SQUARE PA 19348-1568

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942959

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **236.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1259 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. WILLIAM R. LANEY

Mailing Address P.O. BOX 190

City State Zip Code
CABLE WI 54821-0190

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 321.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948345

Amount of Each Receipt this Period
1.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. WILLIAM R. LANEY

Mailing Address P.O. BOX 190

City State Zip Code
CABLE WI 54821-0190

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 321.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950269

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. LES T. LANFORD

Mailing Address 6567 BROWNFIELDS DR

City State Zip Code
BATON ROUGE LA 70811-1118

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
E BATON ROUGE PARRISH SCH- OOL B TEACHER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931964

Amount of Each Receipt this Period
70.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 171.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1260 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. ALFRED LANG	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 1 0
	Mailing Address 2390 VIRGINIA STREET	Transaction ID: SA11.13938638
	City State Zip Code PARK RIDGE IL 60068-2268	Amount of Each Receipt this Period 85.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 355.00	

B.	Full Name (Last, First, Middle Initial) CHARLES R. LANG	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 1 0
	Mailing Address 216 WHITING LN.	Transaction ID: SA11.13934279
	City State Zip Code CHESTERFIELD MO 63005-6917	Amount of Each Receipt this Period 101.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00	

C.	Full Name (Last, First, Middle Initial) MS. HELEN L. LANG	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 1 0
	Mailing Address 28 HILLSIDE RD	Transaction ID: SA11.13938472
	City State Zip Code BEACON NY 12508-4129	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

SUBTOTAL of Receipts This Page (optional)	211.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1261 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. HELEN L. LANG

Mailing Address 28 HILLSIDE RD

City State Zip Code
BEACON NY 12508-4129

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
MM / DD / YYYY
11 / 20 / 2010

Transaction ID: SA11.13971536

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KENNETH LANG

Mailing Address 13627 WINTER CREEK COURT

City State Zip Code
HOUSTON TX 77077-1550

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RIDGEWOOD ENERGY PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13937404

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RICHARD L. LANG

Mailing Address 5189 WOODWARD DR.

City State Zip Code
DOYLESTOWN PA 18902-1229

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AEPA PHYSICIAN ASSISTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13950023

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1065.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1262 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RICHARD L. LANG

Mailing Address 5189 WOODWARD DR.

City State Zip Code
DOYLESTOWN PA 18902-1229

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AEPA PHYSICIAN ASSISTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950219

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. JENNIFER LANGAN

Mailing Address 3230 TERRA GRANADA DR.
APT 2A

City State Zip Code
WALNUT CREEK CA 94595-3550

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936063

Amount of Each Receipt this Period
1.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROGER W. LANGELIERS

Mailing Address 23021 BRUSHLINE CT

City State Zip Code
BEND OR 97701-0119

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ROGER LANGELIERS CONST CONTRACTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 501.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933296

Amount of Each Receipt this Period
251.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 292.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1263 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
ETHEL M. LANGFORD

Mailing Address 1725 10 RD

City State Zip Code
MACK CO 81525-9778

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928515

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
ETHEL M. LANGFORD

Mailing Address 1725 10 RD

City State Zip Code
MACK CO 81525-9778

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940848

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
ETHEL M. LANGFORD

Mailing Address 1725 10 RD

City State Zip Code
MACK CO 81525-9778

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950340

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1264 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ETHEL M. LANGFORD

Mailing Address **1725 10 RD**

City **MACK** State **CO** Zip Code **81525-9778**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1220.00**

Date of Receipt **11 / 18 / 2010**

Transaction ID: SA11.13969811

Amount of Each Receipt this Period **50.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GARY LANGHAM

Mailing Address **20002 POWERSCOURT DR**

City **HUMBLE** State **TX** Zip Code **77346-2012**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BEHAVIORAL SCIENCE TECHNO-
LOGY, INC.** Occupation **CONSULTANT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt **10 / 19 / 2010**

Transaction ID: SA11.13931852

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RICK LANGHOLZ

Mailing Address **700 11TH. ST.**

City **FALLS CHURCH** State **VA** Zip Code **22046-3604**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER
BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **201.00**

Date of Receipt **10 / 18 / 2010**

Transaction ID: SA11.13936144

Amount of Each Receipt this Period **50.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **200.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1265 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
C. E. LANGSTON

Mailing Address 2102 W. MYRTLE DR.

City State Zip Code
CHANDLER AZ 85248-4121

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944152

Amount of Each Receipt this Period
1.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT D. LANIER

Mailing Address P.O. BOX 322

City State Zip Code
PLEASANT VIEW CO 81331-0322

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 346.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956693

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN P. LANIGAN

Mailing Address 4713 CRANBROOK DR W

City State Zip Code
COLLEYVILLE TX 76034-4364

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BNSF CORP. EXECUTIVE V. P.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 1 0

Transaction ID: SA11.13947652

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **5101.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1266 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOSHUA M. LANKFORD

Mailing Address P.O. BOX 626

City State Zip Code
POCOMOKE CITY MD 21851-0626

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 291.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950432

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
TERRI LANNIGAN WAHID

Mailing Address 2823 HUNTER ROAD

City State Zip Code
FAIRFAX VA 22031-1437

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 15000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13961177

Amount of Each Receipt this Period
15000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SPENCER K. LANYI

Mailing Address 915 E COURT ST APT 203

City State Zip Code
FLINT MI 48503-2079

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956012

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 15050.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1267 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. THOMAS P. LARDNER

Mailing Address 12144 CLEAR CREEK RD. NW

City State Zip Code
SILVERDALE WA 98383-9629

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 291.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941229

Amount of Each Receipt this Period
30.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GLENN C. LAREW

Mailing Address 149 MEADOW VIEW LN

City State Zip Code
MORGANTOWN WV 26508-2909

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961543

Amount of Each Receipt this Period
160.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HOYT H. LARISON

Mailing Address 12021 N. VISTAWOOD COURT

City State Zip Code
SPOKANE WA 99218-2968

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 21000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13959337

Amount of Each Receipt this Period
20000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 20190.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1268 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RICHARD L. LARKIN

Mailing Address 4700 SW HOLLYHOCK CIR
APT 323

City State Zip Code
CORVALLIS OR 97333-1491

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
11 / 16 / 2010

Transaction ID: SA11.13969172

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. THOMAS LAROSE

Mailing Address 268 TUCKERS CORNERS ROAD

City State Zip Code
HIGHLAND NY 12528-2260

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
10 / 29 / 2010

Transaction ID: SA11.13961650

Amount of Each Receipt this Period
75.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. THOMAS LAROSE

Mailing Address 268 TUCKERS CORNERS ROAD

City State Zip Code
HIGHLAND NY 12528-2260

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
10 / 29 / 2010

Transaction ID: SA11.13961651

Amount of Each Receipt this Period
75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **250.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1269 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JOHN E. LAROWE

Mailing Address 3801 VILLAGE VIEW DR APT 1120
LANIER VILLAGE

City State Zip Code
GAINESVILLE GA 30506-4334

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 204.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938694

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JOHN E. LAROWE

Mailing Address 3801 VILLAGE VIEW DR APT 1120
LANIER VILLAGE

City State Zip Code
GAINESVILLE GA 30506-4334

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 204.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13969723

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
BARBARA ANN LARSEN

Mailing Address 24876 PASEO DEL RANCHO

City State Zip Code
CALABASAS CA 91302-3083

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED REAL ESTATE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 290.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945327

Amount of Each Receipt this Period
110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

175.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1270 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. EVA E. LARSEN	Date of Receipt MM / DD / YYYY 11 / 12 / 2010
	Mailing Address 1323 QUEENS RD	Transaction ID: SA11.13968299
	City State Zip Code CHARLOTTE NC 28207-2162	Amount of Each Receipt this Period 70.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

B.	Full Name (Last, First, Middle Initial) MR. JACK L. LARSEN	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 241 DEL MESA DRIVE	Transaction ID: SA11.13930340
	City State Zip Code CARMEL CA 93923-7959	Amount of Each Receipt this Period 151.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	

C.	Full Name (Last, First, Middle Initial) MRS. C. RODNEY LARSON	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 58925 858 RD	Transaction ID: SA11.13960225
	City State Zip Code EMERSON NE 68733-3903	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 410.00	

SUBTOTAL of Receipts This Page (optional)	371.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1271 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DEL LARSON

Mailing Address 5262 337TH AVE NW

City State Zip Code
CAMBRIDGE MN 55008-7424

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DEL LARSON INSURANCEAL INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951229

Amount of Each Receipt this Period
95.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. IRVIN J. LARSON

Mailing Address 11462 PALA MESA DR

City State Zip Code
PORTER RANCH CA 91326-1839

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956715

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JERRY D. LARSON

Mailing Address 7818 SHRIKE CT.

City State Zip Code
INDIANAPOLIS IN 46256-1766

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939023

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 345.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1272 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JERRY D. LARSON

Mailing Address 7818 SHRIKE CT.

City INDIANAPOLIS State IN Zip Code 46256-1766

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13939829
 Amount of Each Receipt this Period: 1.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. KIRK T. LARSON

Mailing Address 6913 RIQUEZA CT.

City ELK GROVE State CA Zip Code 95757-3423

FEC ID number of contributing federal political committee. **C**

Name of Employer CA WATER BAORD Occupation GEOLOGIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt: 10 / 17 / 2010
Transaction ID: SA11.13928792
 Amount of Each Receipt this Period: 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RICHARD LARSON

Mailing Address P.O. BOX 2020

City OROVILLE State WA Zip Code 98844-2020

FEC ID number of contributing federal political committee. **C**

Name of Employer DROVILLE PHARMACY Occupation PHARMACIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 553.00

Date of Receipt: 10 / 14 / 2010
Transaction ID: SA11.13930195
 Amount of Each Receipt this Period: 202.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **453.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1273 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. ERIC LARUE		Date of Receipt MM / DD / YYYY 11 / 01 / 2010		
	Mailing Address P.O. BOX 412		Transaction ID: SA11.13963944		
	City SALEM	State KY	Zip Code 42078-0412	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

B.	Full Name (Last, First, Middle Initial) MR. TREY C. LARY		Date of Receipt MM / DD / YYYY 10 / 21 / 2010		
	Mailing Address 6138 SUGAR HILL DR		Transaction ID: SA11.13945271		
	City HOUSTON	State TX	Zip Code 77057-1143	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
	Name of Employer ABHR LLP		Occupation ATTORNEY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

C.	Full Name (Last, First, Middle Initial) MR. EDWARD J. LASHER		Date of Receipt MM / DD / YYYY 10 / 21 / 2010		
	Mailing Address 15 LAURELWOOD DRIVE		Transaction ID: SA11.13942615		
	City NEW HARTFORD	State NY	Zip Code 13413-2229	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
	Name of Employer RETIRED		Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00			

SUBTOTAL of Receipts This Page (optional)	570.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1274 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
LEONARD LASKIN

Mailing Address 8400 CALLIE AVE UNIT 610

City State Zip Code
MORTON GROVE IL 60053-5009

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 271.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940661

Amount of Each Receipt this Period
75.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BILL LATHAM

Mailing Address 407 ORCHARD PARK STE 1C

City State Zip Code
RIDGELAND MS 39157-5124

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955853

Amount of Each Receipt this Period
160.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. HELEN A. LATHAM

Mailing Address 427 S ERIE STREET

City State Zip Code
WHEATON IL 60187-4545

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 451.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941690

Amount of Each Receipt this Period
251.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 486.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1275 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. EDWARD V. LATHROP

Mailing Address **49 SAN LUIS CT**

City **NOVATO** State **CA** Zip Code **94945-1772**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **10 / 18 / 2010**
Transaction ID: SA11.13933933
 Amount of Each Receipt this Period **25.00**
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ARTHUR C. LATNO

Mailing Address **67 CONVENT CT**

City **SAN RAFAEL** State **CA** Zip Code **94901-1333**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1030.00**

Date of Receipt **10 / 26 / 2010**
Transaction ID: SA11.13956244
 Amount of Each Receipt this Period **200.00**
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT A. LATTA

Mailing Address **1011 CY ANN DR.**

City **CHESTERFIELD** State **MO** Zip Code **63017-8402**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **11 / 05 / 2010**
Transaction ID: SA11.13966092
 Amount of Each Receipt this Period **100.00**
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **325.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1276 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) A. LAUB		Date of Receipt
	Mailing Address 1006 WISTERIA WAY		<input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	WAYLAND	MA	01778-2820
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13946483
		Amount of Each Receipt this Period	
		<input type="text" value="500.00"/>	
Name of Employer RETIRED		Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1200.00"/>	

B.	Full Name (Last, First, Middle Initial) MR. JAMES T. LAUBACH		Date of Receipt
	Mailing Address 815 SUWANEE LN		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	HOUSTON	TX	77090-1917
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13961987
		Amount of Each Receipt this Period	
		<input type="text" value="20.00"/>	
Name of Employer RETIRED		Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="205.00"/>	

C.	Full Name (Last, First, Middle Initial) ANNA LAUCHER		Date of Receipt
	Mailing Address 5665 BLACKSBURG ROAD		<input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	CATAWBA	VA	24070-2313
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13945818
		Amount of Each Receipt this Period	
		<input type="text" value="110.00"/>	
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="220.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="630.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1277 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. HAROLD LAUGHLIN

Mailing Address 1325 JEFFERSON AVE.

City State Zip Code
DOWNERS GROVE IL 60516-1214

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13963533

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JAMES R. LAUGHLIN

Mailing Address 445 BAY HILL DR.

City State Zip Code
GRAFORD TX 76449-5017

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2010

Transaction ID: SA11.13951372

Amount of Each Receipt this Period
150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
BEVERLY J. LAURITO

Mailing Address 2541 ROSE RIDGE CT.

City State Zip Code
DAYTON OH 45459-1398

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
MM / DD / YYYY
11 / 03 / 2010

Transaction ID: SA11.13964407

Amount of Each Receipt this Period
175.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **425.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1278 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. VINCENT D. LAURIA

Mailing Address **738 BIRCHWOOD PARK DR**

City **MIDDLE ISLAND** State **NY** Zip Code **11953-2610**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **202.00**

Date of Receipt **10 / 18 / 2010**

Transaction ID: SA11.13933003

Amount of Each Receipt this Period **11.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. VINCENT D. LAURIA

Mailing Address **738 BIRCHWOOD PARK DR**

City **MIDDLE ISLAND** State **NY** Zip Code **11953-2610**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **202.00**

Date of Receipt **10 / 22 / 2010**

Transaction ID: SA11.13949267

Amount of Each Receipt this Period **25.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. RITA L. LAUZON

Mailing Address **14 INGHAM ST. # 1**

City **CHICOPEE** State **MA** Zip Code **01013-4008**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **281.00**

Date of Receipt **10 / 21 / 2010**

Transaction ID: SA11.13946542

Amount of Each Receipt this Period **20.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **56.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1279 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. RITA L. LAUZON
 Mailing Address 14 INGHAM ST. # 1
 City State Zip Code
 CHICOPEE MA 01013-4008
 Date of Receipt
 M M / D D / Y Y Y Y
 1 1 / 0 9 / 2 0 1 0
Transaction ID: SA11.13967519
 Amount of Each Receipt this Period
 20.00
 CONTRIBUTION
 Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
 Occupation INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼
 281.00

B. Full Name (Last, First, Middle Initial)
STELLA LAVENBURG
 Mailing Address 1896 FAIR RD.
 City State Zip Code
 SCHUYKL HAVN PA 17972-8930
 Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 2 1 / 2 0 1 0
Transaction ID: SA11.13945857
 Amount of Each Receipt this Period
 20.00
 CONTRIBUTION
 Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
 Occupation INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼
 296.00

C. Full Name (Last, First, Middle Initial)
MR. ROBERT S. LAVET
 Mailing Address 9976 HIDDEN OAKS CT.
 City State Zip Code
 VIENNA VA 22181-5373
 Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 2 8 / 2 0 1 0
Transaction ID: SA11.13960245
 Amount of Each Receipt this Period
 300.00
 CONTRIBUTION
 Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
 Occupation INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼
 300.00

SUBTOTAL of Receipts This Page (optional) ► 340.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1280 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. MARY LAVOY

Mailing Address 180 E STERNS RD

City State Zip Code
TEMPERANCE MI 48182-9513

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955200

Amount of Each Receipt this Period
30.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JACK LAWLER

Mailing Address 1312 7TH AVENUE NE

City State Zip Code
JACKSONVILLE AL 36265-1175

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941916

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GARY LAWRENCE

Mailing Address 3663 S SHERIDAN BLVD APT 12

City State Zip Code
DENVER CO 80235-2950

FEC ID number of contributing federal political committee. **C**

Name of Employer KINGS SUPER
Occupation GROCERY CLERK

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928278

Amount of Each Receipt this Period
85.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **215.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1281 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. JACQUELINE LAWRENCE

Mailing Address 2737 S CAMINO REAL

City PALM SPRINGS State CA Zip Code 92264-9420

FEC ID number of contributing federal political committee. **C**

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 22 / 2010

Transaction ID: SA11.13945325

Amount of Each Receipt this Period: 100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ROBERT D. LAWRY

Mailing Address 511 E TIMBERLAKE EAST DR.

City SHELTON State WA Zip Code 98584-7909

FEC ID number of contributing federal political committee. **C**

Name of Employer: INFORMATION REQUESTED PER BEST EFFORTS Occupation: INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 410.00

Date of Receipt: 10 / 19 / 2010

Transaction ID: SA11.13931800

Amount of Each Receipt this Period: 155.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CHARLES LAWSON

Mailing Address 10 LINCOLN ST

City ELLSWORTH State ME Zip Code 04605-1617

FEC ID number of contributing federal political committee. **C**

Name of Employer: INFORMATION REQUESTED PER BEST EFFORTS Occupation: INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt: 10 / 25 / 2010

Transaction ID: SA11.13947815

Amount of Each Receipt this Period: 80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **335.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1282 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. DAVID E. LAWSON	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 14611 MINNICH ROAD	Transaction ID: SA11.13941770
	City HOAGLAND State IN Zip Code 46745-9706	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) MRS. PAMELA LAWSON	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 3612 PENINSULA COURT	Transaction ID: SA11.13944772
	City NASHVILLE State TN Zip Code 37217-4509	Amount of Each Receipt this Period 85.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 235.00	

C.	Full Name (Last, First, Middle Initial) MR. KEITH D. LAWTON	Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address 221 HIDDEN VALLEY LANE	Transaction ID: SA11.13962481
	City CASTLE ROCK State CO Zip Code 80108-3487	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00	

SUBTOTAL of Receipts This Page (optional)	635.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1283 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. OGDEN C. LAZENBY		Date of Receipt
	Mailing Address 61 SCIPIO RD.		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	BEAUFORT	SC	29906-6767
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer RETIRED		Occupation RETIRED	Transaction ID: SA11.13932764
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="261.00"/>	<input type="text" value="61.00"/>
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) MR. OGDEN C. LAZENBY		Date of Receipt
	Mailing Address 61 SCIPIO RD.		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	BEAUFORT	SC	29906-6767
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer RETIRED		Occupation RETIRED	Transaction ID: SA11.13934201
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="261.00"/>	<input type="text" value="60.00"/>
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) MR. THACH KIM LE		Date of Receipt
	Mailing Address 3153 OAKBRIDGE DR		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	SAN JOSE	CA	95121-1724
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13962919
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="260.00"/>	<input type="text" value="40.00"/>
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="161.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1284 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. FREDERIC S. LE CLERCQ	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 120 MEETING ST	Transaction ID: SA11.13940858
	City State Zip Code CHARLESTON SC 29401-2216	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer UNIV. OF TN	Occupation PROFESSOR OF LAW	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

B.	Full Name (Last, First, Middle Initial) MR. PHILIP D. LEADBEATER	Date of Receipt MM / DD / YYYY 11 / 02 / 2010
	Mailing Address 24804 ROLLING OAK RD	Transaction ID: SA11.13962668
	City State Zip Code SORRENTO FL 32776-8792	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer BELL CHEM.	Occupation SALES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

C.	Full Name (Last, First, Middle Initial) PATRICK LEAHY	Date of Receipt MM / DD / YYYY 10 / 29 / 2010
	Mailing Address 223 SIXTH ST. SE	Transaction ID: SA11.13959369
	City State Zip Code WASHINGTON DC 20003-1136	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SENIOR ADVISOR	Occupation US ELECTION ASSISTANCE COMMISSION	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	500.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1285 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. GWENDOLYN M. LEAKE	Date of Receipt M M / D D / Y Y Y Y 10 / 18 / 2010
	Mailing Address 1006 WESTWOOD ST.	Transaction ID: SA11.13932869
	City State Zip Code PASCAGOULA MS 39567-7576	Amount of Each Receipt this Period 51.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.00	

B.	Full Name (Last, First, Middle Initial) MR. DAVID L. LEANNA	Date of Receipt M M / D D / Y Y Y Y 10 / 27 / 2010
	Mailing Address 2601 SHE BOSS RD	Transaction ID: SA11.13955898
	City State Zip Code DUCK RIVER TN 38454-3311	Amount of Each Receipt this Period 210.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 865.00	

C.	Full Name (Last, First, Middle Initial) MR. J. RALPH LEATHERMAN	Date of Receipt M M / D D / Y Y Y Y 10 / 26 / 2010
	Mailing Address 2 CLUBHOUSE GREEN	Transaction ID: SA11.13956737
	City State Zip Code SAN ANTONIO TX 78257-1295	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	1261.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1286 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. CUC LEBA

Mailing Address 116 VILLANOVA DR

City State Zip Code
LAWRENCE TOWNSHIP NJ 08648-4431

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 431.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936814

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. CUC LEBA

Mailing Address 116 VILLANOVA DR

City State Zip Code
LAWRENCE TOWNSHIP NJ 08648-4431

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 431.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939709

Amount of Each Receipt this Period
41.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. CUC LEBA

Mailing Address 116 VILLANOVA DR

City State Zip Code
LAWRENCE TOWNSHIP NJ 08648-4431

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 431.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943143

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **121.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1287 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MISS ALICE LEBEWOHL</p> <p>Mailing Address 5500 CALLE REAL BLDG A</p> <p>City State Zip Code SANTA BARBARA CA 93111-3606</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 870.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 15 / 2010</p> <p>Transaction ID: SA11.13931380</p> <p>Amount of Each Receipt this Period 100.00</p> <p>CONTRIBUTION</p>
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<p>B. Full Name (Last, First, Middle Initial) MISS ALICE LEBEWOHL</p> <p>Mailing Address 5500 CALLE REAL BLDG A</p> <p>City State Zip Code SANTA BARBARA CA 93111-3606</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 870.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 11 / 16 / 2010</p> <p>Transaction ID: SA11.13969156</p> <p>Amount of Each Receipt this Period 100.00</p> <p>CONTRIBUTION</p>
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<p>C. Full Name (Last, First, Middle Initial) MR. V. PRICE LEBLANC</p> <p>Mailing Address 8811 VETERANS MEMORIAL BOULEVARD</p> <p>City State Zip Code METAIRIE LA 70003-5236</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 2000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 25 / 2010</p> <p>Transaction ID: SA11.13957949</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>CONTRIBUTION</p>
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SUBTOTAL of Receipts This Page (optional)	1200.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1288 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
RICHARD K. LEBLOND

Mailing Address 1000 VICARS LANDING WAY APT C3

City State Zip Code
PONTE VEDRA FL 32082-3160

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954670

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. ALICE LEBOWOHL

Mailing Address 5500 CALLE REAL APT 129

City State Zip Code
SANTA BARBARA CA 93111-1692

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13945997

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. ALICE LEBOWOHL

Mailing Address 5500 CALLE REAL APT 129

City State Zip Code
SANTA BARBARA CA 93111-1692

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949153

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **500.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1289 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. NICHOLAS M. LECCESE, JR.

Mailing Address 31 COBB AVENUE

City State Zip Code
WHITE PLAINS NY 10606-3615

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AXIS REINSURANCE ACTUARY

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958427

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ROBERT E. LEDFORD

Mailing Address 20419 CRESCENT POINTE PL

City State Zip Code
ASHBURN VA 20147-5538

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 252.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958535

Amount of Each Receipt this Period

26.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. SUZIE DAY LEDIEU

Mailing Address 805 WHISPERING BROOKE DR.

City State Zip Code
NEWTOWN SQ PA 19073-2751

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOLY CHILD ACADEMY SCHOOL TEACHER- PART TIME

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 428.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935789

Amount of Each Receipt this Period

75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

126.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1290 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. ELEANOR LEE	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 1930 W. RIVER BEND COURT	Transaction ID: SA11.13957011
	City State Zip Code MEQUON WI 53092-2925	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation LOGEMANN BROTHERS COMPANY MARKETER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) DR. GEORGE C. LEE	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 1749 LAS PALMITAS STREET	Transaction ID: SA11.13941037
	City State Zip Code S. PASADENA CA 91030-3530	Amount of Each Receipt this Period 160.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 580.00	

C.	Full Name (Last, First, Middle Initial) MR. JAMES H. LEE	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 2916 OAK AVE	Transaction ID: SA11.13947529
	City State Zip Code MATTOON IL 61938-4936	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional)	280.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1291 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. JANET L. LEE

Mailing Address 69 SKILLINGS CORNER RD

City State Zip Code
AUBURN ME 04210-8723

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13947769

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JOHN RIDINGS LEE, JR.

Mailing Address 120 NORTH TOPANGA CANYON ROAD

City State Zip Code
TOPANGA CA 90290-3851

FEC ID number of contributing federal political committee. **C**

Name of Employer
RIDINGS/MACKLER ENTERTAIN-
MENT (RME)

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

EXECUTIVE

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13928416

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. MARY H. LEE

Mailing Address 450 COUNTY RD. 410

City State Zip Code
MADISONVILLE TN 37354-8918

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼
365.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13962263

Amount of Each Receipt this Period

75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1175.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1292 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. MOLLY LEE	Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address 112 SHANNON LN	Transaction ID: SA11.13962878
	City State Zip Code GRANVILLE OH 43023-8500	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 511.00	

B.	Full Name (Last, First, Middle Initial) MRS. MOLLY LEE	Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address 112 SHANNON LN	Transaction ID: SA11.13963573
	City State Zip Code GRANVILLE OH 43023-8500	Amount of Each Receipt this Period 151.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 511.00	

C.	Full Name (Last, First, Middle Initial) RICHARD C. LEE	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 3304 N SEA PINES CIR	Transaction ID: SA11.13952533
	City State Zip Code MESA AZ 85215-0751	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.00	

SUBTOTAL of Receipts This Page (optional)	▶	321.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1293 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) RICHARD C. LEE	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 3304 N SEA PINES CIR	Transaction ID: SA11.13960342
	City State Zip Code MESA AZ 85215-0751	Amount of Each Receipt this Period 35.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 216.00

B.	Full Name (Last, First, Middle Initial) ROBERT E. LEE	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address P.O. BOX 40035	Transaction ID: SA11.13935125
	City State Zip Code TUCSON AZ 85717-0035	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer R.E. LEE MECHANICAL CONTR- ACTING		Occupation CONTRACTOR
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1130.00

C.	Full Name (Last, First, Middle Initial) ROBERT E. LEE	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address P.O. BOX 40035	Transaction ID: SA11.13952853
	City State Zip Code TUCSON AZ 85717-0035	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer R.E. LEE MECHANICAL CONTR- ACTING		Occupation CONTRACTOR
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1130.00

SUBTOTAL of Receipts This Page (optional)	▶	285.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1294 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. TOMMY L. LEE	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 4370 N CHINA RD	Transaction ID: SA11.13950123
	City State Zip Code BEAUMONT TX 77713-3439	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 235.00		

B.	Full Name (Last, First, Middle Initial) MRS. VIVIAN L. LEE	Date of Receipt MM / DD / YYYY 11 / 09 / 2010
	Mailing Address 2207 STONEY BROOK DR	Transaction ID: SA11.13967241
	City State Zip Code HOUSTON TX 77063-1934	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00		

C.	Full Name (Last, First, Middle Initial) YUNG J. LEE	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 909 BOREN AVE APT. 506	Transaction ID: SA11.13952069
	City State Zip Code SEATTLE WA 98104-1381	Amount of Each Receipt this Period 70.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 212.00		

SUBTOTAL of Receipts This Page (optional)	295.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1295 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) YUNG J. LEE		Date of Receipt
	Mailing Address 909 BOREN AVE APT. 506		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	SEATTLE	WA	98104-1381
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13953740
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="212.00"/>	<input type="text" value="2.00"/>
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MISS LISANNE E. LEECH		Date of Receipt
	Mailing Address 940 ADELAIDE DR		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	NORTHBROOK	IL	60062-3423
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13931616
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="300.00"/>	<input type="text" value="60.00"/>
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MR. JEROME H. LEFFELER		Date of Receipt
	Mailing Address 75 JEWEL DR		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	WINFIELD	MO	63389-3008
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer RETIRED		Occupation RETIRED	Transaction ID: SA11.13955610
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="285.00"/>	<input type="text" value="20.00"/>
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="82.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1296 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. HELEN D. LEFOR

Mailing Address 80 GOLD ST APT 3J

City State Zip Code
NEW YORK NY 10038-1880

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 415.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928265

Amount of Each Receipt this Period

60.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. HELEN D. LEFOR

Mailing Address 80 GOLD ST APT 3J

City State Zip Code
NEW YORK NY 10038-1880

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 415.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13942068

Amount of Each Receipt this Period

65.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. ARLENE B. LEGARE

Mailing Address 500 PATT AVENUE
APARTMENT 11

City State Zip Code
GLENDDIVE MT 59330-1431

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13969496

Amount of Each Receipt this Period

35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1297 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DANNY LEGATE

Mailing Address 2411 S.E. AVALON RD.

City State Zip Code
PORT ST LUCIE FL 34952-6572

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AWARENESS TECH PAINTER ASST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934867

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DANNY LEGATE

Mailing Address 2411 S.E. AVALON RD.

City State Zip Code
PORT ST LUCIE FL 34952-6572

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AWARENESS TECH PAINTER ASST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956311

Amount of Each Receipt this Period
120.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DANNY LEGATE

Mailing Address 2411 S.E. AVALON RD.

City State Zip Code
PORT ST LUCIE FL 34952-6572

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AWARENESS TECH PAINTER ASST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Transaction ID: SA11.13960666

Amount of Each Receipt this Period
120.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 340.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1298 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES R. LEGERSKI

Mailing Address 4011 DOMINION ST

City BISMARCK State ND Zip Code 58503-5524

FEC ID number of contributing federal political committee. **C**

Name of Employer HIS RESOURCES ENGINEERING AND MGMT. Occupation OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 26 / 2010

Transaction ID: SA11.13951579

Amount of Each Receipt this Period 100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. HAROLD A. LEHMAN

Mailing Address 375 N BROAD ST

City CANFIELD State OH Zip Code 44406-1256

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 371.00

Date of Receipt 10 / 28 / 2010

Transaction ID: SA11.13959967

Amount of Each Receipt this Period 36.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MARY H. LEHMAN

Mailing Address 5111 TANGLE LN

City HOUSTON State TX Zip Code 77056-2115

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 382.00

Date of Receipt 10 / 25 / 2010

Transaction ID: SA11.13952456

Amount of Each Receipt this Period 82.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 218.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1299 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. NORMA LEHR

Mailing Address 525 LEHR PL

City State Zip Code
MANTECA CA 95336-3762

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929649

Amount of Each Receipt this Period
55.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. LOUISE S. LEHRMAN

Mailing Address 1 FAWCETT PLACE
STE. 130

City State Zip Code
GREENWICH CT 06830-6553

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13945233

Amount of Each Receipt this Period
30400.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL J. LEIDER

Mailing Address 24108 220TH PL SE

City State Zip Code
MAPLE VALLEY WA 98038-5885

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 227.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949236

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **30480.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1300 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT H. LEILICH

Mailing Address 11 CHESTNUT HILL CT

City SPRING State TX Zip Code 77380-4617

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 11 / 19 / 2010
Transaction ID: SA11.13970044
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CHERI L. LEMLEY

Mailing Address 4726 DORNOCH CT

City RAPID CITY State SD Zip Code 57702-9543

FEC ID number of contributing federal political committee. **C**

Name of Employer BHJMC- SELF EMPLOYED
Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13938877
Amount of Each Receipt this Period: 1.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. MARK L. LEMMON

Mailing Address 1717 MAIN ST STE 5880

City DALLAS State TX Zip Code 75201-7318

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED
Occupation SELF-EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1120.00

Date of Receipt: 11 / 19 / 2010
Transaction ID: SA11.13972163
Amount of Each Receipt this Period: 1000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1051.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1301 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. KENNETH W. LEMONS

Mailing Address P.O. BOX 340309

City State Zip Code
AUSTIN TX 78734-0006

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REDSTONE OPERATING INC OIL & GAS PRODUCTION

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956747

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ROBERT LEMON, III

Mailing Address 201 SAINT CHARLES AVE FL 48

City State Zip Code
NEW ORLEANS LA 70170

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JONES WALKER ATTORNEY

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 401.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946735

Amount of Each Receipt this Period
201.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. JEAN P. LENHART

Mailing Address 1400 GEARY BLVD APT 2409

City State Zip Code
SAN FRANCISCO CA 94109-9316

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 236.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938503

Amount of Each Receipt this Period
55.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

1256.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1302 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
FATHER FRANK M. LENZ

Mailing Address 456 CO. RD. KB

City MARQUETTE State MI Zip Code 49855-9750

FEC ID number of contributing federal political committee. **C**

Name of Employer ROMAN CATHOLIC DIOCESE OF MARQUETTE Occupation CATHOLIC PRIEST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 27 / 2010
Transaction ID: SA11.13955857
 Amount of Each Receipt this Period: 55.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MARY LENZI

Mailing Address P.O. BOX 159

City CLAYPOOL State AZ Zip Code 85532-0159

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 306.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13933193
 Amount of Each Receipt this Period: 46.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MARY LENZI

Mailing Address P.O. BOX 159

City CLAYPOOL State AZ Zip Code 85532-0159

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 306.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13942789
 Amount of Each Receipt this Period: 45.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 146.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1303 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. DAVID LEONARD

Mailing Address 108 AUTUMN WIND DR

City MADISON State AL Zip Code 35758-8006

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13941560
 Amount of Each Receipt this Period: 101.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAMES WALTER LEONARD

Mailing Address 500 1/2 S MAIN ST.

City MANSFIELD State OH Zip Code 44907-5005

FEC ID number of contributing federal political committee. **C**

Name of Employer WAL-MART Occupation CLERK/CASHIER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 253.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13940210
 Amount of Each Receipt this Period: 10.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES WALTER LEONARD

Mailing Address 500 1/2 S MAIN ST.

City MANSFIELD State OH Zip Code 44907-5005

FEC ID number of contributing federal political committee. **C**

Name of Employer WAL-MART Occupation CLERK/CASHIER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 253.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13954364
 Amount of Each Receipt this Period: 10.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 121.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1304 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MARCUS K. LEONARD

Mailing Address P.O. BOX 51

City State Zip Code
LACASSINE LA 70650-0051

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation DRILLING CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932688

Amount of Each Receipt this Period
101.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MICHAEL LEONARD

Mailing Address 610 TERRELL RD.

City State Zip Code
SAN ANTONIO TX 78209-6131

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13931448

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. PATRICIA LEONARD

Mailing Address 728 E ACOMA DR

City State Zip Code
PHOENIX AZ 85022-4356

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929353

Amount of Each Receipt this Period
30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 631.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1305 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. PATRICIA LEONARD
 Mailing Address 728 E ACOMA DR
 City State Zip Code
 PHOENIX AZ 85022-4356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 231.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 1 2 / 2 0 1 0
Transaction ID: SA11.13968131
 Amount of Each Receipt this Period
 1.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOSEPH T. LEONE
 Mailing Address 83 PANORAMA TRL.
 City State Zip Code
 ROCHESTER NY 14625-1507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 1 / 2 0 1 0
Transaction ID: SA11.13963250
 Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ANDREW S. LEONG
 Mailing Address 566 COMMERCIAL ST.
 City State Zip Code
 SAN FRANCISCO CA 94111-3028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 700.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 2 / 2 0 1 0
Transaction ID: SA11.13949339
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 151.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1306 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
GARY LEOPOLD

Mailing Address 2805 E. 132ND AVE.

City State Zip Code
THORNTON CO 80241-2002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WHATLEY, INC SALES MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 19 / 2010

Transaction ID: SA11.13932065

Amount of Each Receipt this Period
60.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. MARY ELLEN LEOPOLD

Mailing Address 4445 LYNBROOK LOOP
APT 2

City State Zip Code
REDDING CA 96003-6840

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 346.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 19 / 2010

Transaction ID: SA11.13942079

Amount of Each Receipt this Period
15.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. SUSAN K. LERMOND

Mailing Address 2 SKYVIEW DR

City State Zip Code
NORTH HALEDON NJ 07508-3143

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 18 / 2010

Transaction ID: SA11.13937474

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **175.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1307 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. SUSAN K. LERMOND

Mailing Address 2 SKYVIEW DR

City State Zip Code
NORTH HALEDON NJ 07508-3143

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 310.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13965373

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. AUDREY D. LERTORA

Mailing Address 1291 LAKEMONT DRIVE

City State Zip Code
PITTSBURGH PA 15243-1864

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939255

Amount of Each Receipt this Period

60.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. AUDREY D. LERTORA

Mailing Address 1291 LAKEMONT DRIVE

City State Zip Code
PITTSBURGH PA 15243-1864

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13945708

Amount of Each Receipt this Period

40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

210.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1308 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. CATHY A. LESHER

Mailing Address 4485 RAVENNA AVE SE

City State Zip Code
EAST CANTON OH 44730-9730

FEC ID number of contributing federal political committee. **C**

Name of Employer
D & K SUPPLY AND EQUIPMENT INC.

Occupation
OFFICE MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962504

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
THOMAS LESSER

Mailing Address 3045 WOODSTREAM DRIVE

City State Zip Code
VALDESE NC 28690-9449

FEC ID number of contributing federal political committee. **C**

Name of Employer
CHRISTIAN BROTHERS FOUNDATION

Occupation
ADMINISTRATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928494

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. CHARLES E. LETOURNEAU

Mailing Address 583 HARDISON DRIVE

City State Zip Code
ARAPAHOE NC 28510-9717

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935788

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

500.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1309 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. RITA LETTIERI	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 1113A THORNBURY LN	Transaction ID: SA11.13959702
	City State Zip Code MANCHESTER NJ 08759-5269	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	

B.	Full Name (Last, First, Middle Initial) MRS. WENDY LEUNG	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 2712 LONG GROVE DR	Transaction ID: SA11.13940045
	City State Zip Code MARIETTA GA 30062-8716	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation INSURANCE AGENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 331.00	

C.	Full Name (Last, First, Middle Initial) MRS. WENDY LEUNG	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 2712 LONG GROVE DR	Transaction ID: SA11.13952148
	City State Zip Code MARIETTA GA 30062-8716	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation INSURANCE AGENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 331.00	

SUBTOTAL of Receipts This Page (optional)	▶	105.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1310 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. NORMA LEVER

Mailing Address 702 SPRING LN

City State Zip Code
LANSDALE PA 19446-6231

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946302

Amount of Each Receipt this Period
35.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. ETHEL LEVINE

Mailing Address 7925 150TH STREET
APARTMENT F21

City State Zip Code
FLUSHING NY 11367-3818

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946231

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. ETHEL LEVINE

Mailing Address 7925 150TH STREET
APARTMENT F21

City State Zip Code
FLUSHING NY 11367-3818

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959974

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **235.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1311 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. H. FRED LEVINE

Mailing Address 109 NORTH POST OAK LANE
SUITE 350

City HOUSTON State TX Zip Code 77024-7769

FEC ID number of contributing federal political committee. **C**

Name of Employer FREVEL, LTD. Occupation ENTREPRENEUR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 1 0

Transaction ID: SA11.13966055

Amount of Each Receipt this Period
10000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. HERBERT A. LEVIN

Mailing Address 724 E GRINNELL DR

City BURBANK State CA Zip Code 91501-1720

FEC ID number of contributing federal political committee. **C**

Name of Employer DEPARTMENT OF JUSTICE OF THE STATE OF Occupation LAWYER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940604

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HERBERT A. LEVIN

Mailing Address 724 E GRINNELL DR

City BURBANK State CA Zip Code 91501-1720

FEC ID number of contributing federal political committee. **C**

Name of Employer DEPARTMENT OF JUSTICE OF THE STATE OF Occupation LAWYER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952954

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10100.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1312 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. HERBERT A. LEVIN

Mailing Address 724 E GRINNELL DR

City State Zip Code
BURBANK CA 91501-1720

FEC ID number of contributing federal political committee. **C**

Name of Employer DEPARTMENT OF JUSTICE OF THE STATE OF
Occupation LAWYER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	2	/	2	0	1	0

Transaction ID: SA11.13972776

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RONALD J. LEVY

Mailing Address 613 EAGLE VIEW CIR

City State Zip Code
TALLAHASSEE FL 32311-1208

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	1	0

Transaction ID: SA11.13961040

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID LEWIS

Mailing Address 9221 CANTER DR

City State Zip Code
DALLAS TX 75231-1403

FEC ID number of contributing federal political committee. **C**

Name of Employer LINCOLN PROPERTY
Occupation REAL ESTATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
356.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13932473

Amount of Each Receipt this Period
1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **101.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1313 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DAVID LEWIS

Mailing Address 9221 CANTER DR

City State Zip Code
DALLAS TX 75231-1403

FEC ID number of contributing federal political committee. **C**

Name of Employer LINCOLN PROPERTY Occupation REAL ESTATE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 356.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13941012
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAVID LEWIS

Mailing Address 9221 CANTER DR

City State Zip Code
DALLAS TX 75231-1403

FEC ID number of contributing federal political committee. **C**

Name of Employer LINCOLN PROPERTY Occupation REAL ESTATE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 356.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13943674
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID LEWIS

Mailing Address 9221 CANTER DR

City State Zip Code
DALLAS TX 75231-1403

FEC ID number of contributing federal political committee. **C**

Name of Employer LINCOLN PROPERTY Occupation REAL ESTATE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 356.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13956531
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 150.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1314 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
HARLEY EDWIN LEWIS

Mailing Address 66 DAYFLOWER

City NILES State MI Zip Code 49120-4472

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt 10 / 18 / 2010

Transaction ID: SA11.13932603

Amount of Each Receipt this Period 101.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAMES P. LEWIS

Mailing Address 715 MAIDEN CHOICE LANE
APT. HV415

City CATONSVILLE State MD Zip Code 21228-5990

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 701.00

Date of Receipt 10 / 22 / 2010

Transaction ID: SA11.13948357

Amount of Each Receipt this Period 1.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES P. LEWIS

Mailing Address 715 MAIDEN CHOICE LANE
APT. HV415

City CATONSVILLE State MD Zip Code 21228-5990

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 701.00

Date of Receipt 10 / 22 / 2010

Transaction ID: SA11.13949724

Amount of Each Receipt this Period 500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 602.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1315 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RALPH K. LEWIS

Mailing Address 13559 KENSINGTON PL.

City State Zip Code
CARMEL IN 46032-5360

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt
MM / DD / YYYY
11 / 05 / 2010

Transaction ID: SA11.13966181

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. SALLY N. LEWIS

Mailing Address 12135 STEVENS CT

City State Zip Code
LIVE OAK TX 78233-4257

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13929616

Amount of Each Receipt this Period
55.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
STAN LEWIS

Mailing Address 959 BEAR PAW RDG

City State Zip Code
DAHLONEGA GA 30533-7169

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS PHARMACIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13937194

Amount of Each Receipt this Period
150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 230.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1316 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. ROBERT T. LEWIT

Mailing Address 7721 STATE ROUTE 8

City State Zip Code
BRANT LAKE NY 12815-2249

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	1	0

Transaction ID: SA11.13945650

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. WILLIAM V. LEWIT

Mailing Address 25 VALLEY RD.

City State Zip Code
SCARSDALE NY 10583-1126

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13935662

Amount of Each Receipt this Period
180.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MARK LEWON

Mailing Address 4000 S 2000 EAST

City State Zip Code
SALT LAKE CITY UT 84124-1733

FEC ID number of contributing federal political committee. **C**

Name of Employer UTAH METAL WORKS INC. Occupation V P/OPERATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	4	/	2	0	1	0

Transaction ID: SA11.13965616

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **930.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1317 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DAVID W. LEYSHON

Mailing Address 408 TRIO LN

City State Zip Code
WEST CHESTER PA 19382-2340

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LYONDELL ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13935722

Amount of Each Receipt this Period
15.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAVID W. LEYSHON

Mailing Address 408 TRIO LN

City State Zip Code
WEST CHESTER PA 19382-2340

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LYONDELL ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13946195

Amount of Each Receipt this Period
15.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. JUANITA LIEBER

Mailing Address 3634 S 215TH ST W

City State Zip Code
GODDARD KS 67052-8963

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
MM / DD / YYYY
11 / 03 / 2010

Transaction ID: SA11.13965328

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **80.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1318 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. VICTORIA L. LIGGETT, JR.	Date of Receipt MM / DD / YYYY 11 / 04 / 2010
	Mailing Address 625 LAKE SHORE ROAD	Transaction ID: SA11.13966039
	City State Zip Code GROSSE POINTE SHOR MI 48236-2401	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation HOMEMAKER HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

B.	Full Name (Last, First, Middle Initial) MARGUERITE F. LILLARD	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 617 PARK BLVD.	Transaction ID: SA11.13954600
	City State Zip Code BATON ROUGE LA 70806-5332	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

C.	Full Name (Last, First, Middle Initial) MR. CHARLENE LIMERICK	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 586 LIMERICK ROAD	Transaction ID: SA11.13945011
	City State Zip Code SHUQUALAK MS 39361-9629	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

SUBTOTAL of Receipts This Page (optional)	5105.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1319 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MITCHELL M. J. LIN	Date of Receipt MM / DD / YYYY 10 / 29 / 2010
	Mailing Address 14 SHADOW CREEK	Transaction ID: SA11.13959107
	City State Zip Code PENFIELD NY 14526-1062	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer EASTMAN KODAK COMPANY	Occupation RESEARCH FELLOW	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) MS. PRISCILLA M.P. LIN	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 275 W RIVERGLEN DR.	Transaction ID: SA11.13960096
	City State Zip Code COLUMBUS OH 43085-3869	Amount of Each Receipt this Period 51.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation CORE PROVIDER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.00	

C.	Full Name (Last, First, Middle Initial) MR. DEXTER C. LINDBERG	Date of Receipt MM / DD / YYYY 11 / 19 / 2010
	Mailing Address 15912 SE 35TH ST	Transaction ID: SA11.13972038
	City State Zip Code VANCOUVER WA 98683-3751	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional)	251.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1320 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. SANDY LINDEMAN

Mailing Address 1915 S. DATE STREET

City State Zip Code
PLAINVIEW TX 79072-9392

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CAPROCK-PLAINS BAPTIST AR- EA SECRETARY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942620

Amount of Each Receipt this Period
110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JOHN LINDNER

Mailing Address 6310 N AMES AVE

City State Zip Code
KANSAS CITY MO 64151-4814

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PEOPLES BANK LOAN OFFICER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 640.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939157

Amount of Each Receipt this Period
120.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. BRUCE A. LINDSAY

Mailing Address 13059 W LAKE SALLIE DRIVE

City State Zip Code
DETROIT LAKES MN 56501-7101

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928974

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 280.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1321 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
						<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. DAVID T. LINDSAY

Mailing Address 420 E. 500 S.
P.O. BOX 362

City State Zip Code
HEBER CITY UT 84032-2345

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GENUIMS POSTS CO TRUCK DRIVER

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
202.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13933312

Amount of Each Receipt this Period
102.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JAMES LINDSAY

Mailing Address 1115 SKYLINE DR

City State Zip Code
ELKHORN NE 68022-1731

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
10 / 17 / 2010

Transaction ID: SA11.13928782

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ORVILLE C. LINDSEY

Mailing Address P.O. BOX 128

City State Zip Code
THROCKMORTON TX 76483-0128

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED RANCHER

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
361.00

Date of Receipt
MM / DD / YYYY
10 / 14 / 2010

Transaction ID: SA11.13930471

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **352.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1322 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
ALBERT LINENDOLL

Mailing Address 149 KINGSLEY RD.

City State Zip Code
BURNT HILLS NY 12027-9505

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 435.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954537

Amount of Each Receipt this Period

120.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
IRVING LINGO

Mailing Address 132 ALTON RD

City State Zip Code
NASHVILLE TN 37205-4202

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929671

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
JULIE LINN

Mailing Address 2830 S COLUMBUS ST

City State Zip Code
ARLINGTON VA 22206-1411

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
K12 INC. BUSINESS DEVELOPMENT

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 290.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959416

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

620.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1323 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. ROBERTA LINN

Mailing Address PO BOX 945

City State Zip Code
FORT SUMNER NM 88119-0945

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
MM / DD / YYYY
11 / 03 / 2010

Transaction ID: SA11.13964434

Amount of Each Receipt this Period
75.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. COREY A. LINQUIST

Mailing Address 2521 CLARKSVILLE ROAD

City State Zip Code
RESCUE CA 95672-9606

FEC ID number of contributing federal political committee. **C**

Name of Employer METROPCS, INC.
Occupation MANAGEMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1025.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2010

Transaction ID: SA11.13951593

Amount of Each Receipt this Period
525.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. COREY A. LINQUIST

Mailing Address 2521 CLARKSVILLE ROAD

City State Zip Code
RESCUE CA 95672-9606

FEC ID number of contributing federal political committee. **C**

Name of Employer METROPCS, INC.
Occupation MANAGEMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1025.00

Date of Receipt
MM / DD / YYYY
11 / 03 / 2010

Transaction ID: SA11.13964449

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1100.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1324 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. TROY E. LIPP

Mailing Address 21121 PEACH TREE RD

City State Zip Code
DICKERSON MD 20842-9164

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13945493

Amount of Each Receipt this Period
85.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. MARTHA LIPPERT

Mailing Address 2801 NE 133RD STREET

City State Zip Code
EDMOND OK 73013-5687

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13931583

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
PHILLIP E. LIPPINCOTT

Mailing Address P.O. BOX 2159

City State Zip Code
PARK CITY UT 84060-2159

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13934647

Amount of Each Receipt this Period
150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 335.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1325 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. STEVEN T. LIPPIA

Mailing Address 10412 CHIMNEY FLAT CT

City State Zip Code
LAS VEGAS NV 89129-4527

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED ENTERTAINER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942835

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DOUGLAS LIPSKY

Mailing Address 301 ELIZABETH STREET

City State Zip Code
NEW YORK NY 10012-2804

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SEYFARTH SHAW LLP ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918874

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. WILLIAM LIPSKY

Mailing Address 5802 PICASSO PL

City State Zip Code
HOUSTON TX 77096-3913

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955662

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **550.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1326 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JEFFREY LISKO

Mailing Address 9116 STEPHENS POINTE

City State Zip Code
EDEN PRAIRIE MN 55347

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MINNESOTA GASTROENTOLOGY GASTROENTOLOGIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11A.13977519

Amount of Each Receipt this Period
2500.00

IN-KIND CONTRIBUTION

IN-KIND: FOOD AND DRINKS

B.

Full Name (Last, First, Middle Initial)
MS. ANNA E. LISTENBERGER

Mailing Address 914 THAYER STREET

City State Zip Code
PLYMOUTH IN 46563-2861

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949420

Amount of Each Receipt this Period
20.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. ANNA E. LISTENBERGER

Mailing Address 914 THAYER STREET

City State Zip Code
PLYMOUTH IN 46563-2861

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13961058

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **2570.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1327 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. JOHN R. LISTER	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 4549 PECAN VALLEY DRIVE	Transaction ID: SA11.13948197
	City State Zip Code PLANO TX 75093-3327	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

B.	Full Name (Last, First, Middle Initial) DR. STEVEN LITINSKY	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 17052 BROOKWOOD DR.	Transaction ID: SA11.13945563
	City State Zip Code BOCA RATON FL 33496-5928	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer DELRAY EYE ASSOCIATES, P.-A.	Occupation PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) MS. JOSEPH LITTELL	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 531 GROSS STREET	Transaction ID: SA11.13965290
	City State Zip Code PITTSBURGH PA 15224-2204	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	▶	1450.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1328 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
NELSON LITTERST

Mailing Address
325 7TH ST. NW SUITE 400

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
C2 GROUP, LLC PARTNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
10 / 14 / 2010

Transaction ID: SA11A.13977528

Amount of Each Receipt this Period
250.00

IN-KIND CONTRIBUTION

IN-KIND: FOOD AND BEVERAGE

B.

Full Name (Last, First, Middle Initial)
MR. BILLY I. LITTLE

Mailing Address 5401 WILMA ST

City State Zip Code
TORRANCE CA 90503-1228

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13939314

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JACK LITTLE

Mailing Address 969 MEGAN LN

City State Zip Code
WILLARD MO 65781-8199

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13929665

Amount of Each Receipt this Period
60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 360.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1329 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. LARRY R. LITTLE

Mailing Address 209 CACIQUE DRIVE

City State Zip Code
SAINT AUGUSTINE FL 32086-8828

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ARMOR HEALTHCARE INC. NURSE/RN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt: 11 / 05 / 2010
Transaction ID: SA11.13966272
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MARK S. LITTLE

Mailing Address 107 PALMETTO DUNES CIR

City State Zip Code
NAPLES FL 34113-7559

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13938706
Amount of Each Receipt this Period: 80.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT WESLEY LITTLE

Mailing Address 2921 NORMAN CIR.

City State Zip Code
DULUTH GA 30096-3649

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 415.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13944469
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 170.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1330 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ROGERS LITTLEJOHN	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 401 WOODCREEK DR.	Transaction ID: SA11.13931911
	City State Zip Code LYNDEN WA 98264-1111	Amount of Each Receipt this Period 110.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

B.	Full Name (Last, First, Middle Initial) SHONNA LITTLE	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 19 FOX ISLAND LANE	Transaction ID: SA11.13928819
	City State Zip Code GREAT FALLS MT 59405-8216	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 410.00	

C.	Full Name (Last, First, Middle Initial) MS. SUSAN L. LITTLE	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 4 MILL RD	Transaction ID: SA11.13945320
	City State Zip Code MALVERN PA 19355-3514	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00	

SUBTOTAL of Receipts This Page (optional)	▶	410.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1331 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DR. TOM D. LITTLE

Mailing Address 303 SALISH CT

City State Zip Code
KALISPELL MT 59901-2543

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 341.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13929992

Amount of Each Receipt this Period

1.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. WILLIAM LITTLE

Mailing Address 6663 ARMITOS DRIVE

City State Zip Code
CAMARILLO CA 93012-8828

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 800.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930375

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. PAT LITTON

Mailing Address 5925 STATE HIGHWAY 59 S

City State Zip Code
GILLETTE WY 82718-6908

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED RANCHER/HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963863

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

351.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1332 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) JESSIE LIU		Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 5215 WASHINGTON BOULEVARD		Transaction ID: SA11.13957625
	City ARLINGTON	State VA	Zip Code 22205-2701
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer JENNER & BLOCK LLP		Occupation ATTORNEY	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

B.	Full Name (Last, First, Middle Initial) LIN LIN LIU		Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 6714 WESTCHESTER		Transaction ID: SA11.13959350
	City HOUSTON	State TX	Zip Code 77005-3758
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer SELF-EMPLOYED		Occupation PHYSICIAN	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

C.	Full Name (Last, First, Middle Initial) MR. JAMES A. LIVESAY, JR.		Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 654 BOYS CAMP RD. P.O. BOX 841		Transaction ID: SA11.13933620
	City KILMARNOCK	State VA	Zip Code 22482-3817
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer RETIRED		Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1775.00		

SUBTOTAL of Receipts This Page (optional)	5600.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1333 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. JAMES A. LIVESAY, JR.		Date of Receipt																					
	Mailing Address 654 BOYS CAMP RD. P.O. BOX 841		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>2</td><td>2</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	2	/	2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	1	/	2	2	/	2	0	1	0														
	City State Zip Code KILMARNOCK VA 22482-3817		Transaction ID: SA11.13972874																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00																						
Name of Employer RETIRED		Occupation RETIRED																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1775.00																						
		CONTRIBUTION																						

B.	Full Name (Last, First, Middle Initial) MRS. WILLIAM LIVINGSTONE, III		Date of Receipt																					
	Mailing Address 9316 CANTER DR		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	5	/	2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	1	/	1	5	/	2	0	1	0														
	City State Zip Code DALLAS TX 75231-1406		Transaction ID: SA11.13968877																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00																						
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00																						
		CONTRIBUTION																						

C.	Full Name (Last, First, Middle Initial) MR. AARON LIVNEY		Date of Receipt																					
	Mailing Address 215 ASH LN		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>2</td><td>5</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	5	/	2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0	/	2	5	/	2	0	1	0														
	City State Zip Code LAFAYETTE HL PA 19444-2101		Transaction ID: SA11.13953368																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00																						
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation PROGRAMMER																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 235.00																						
		CONTRIBUTION																						

SUBTOTAL of Receipts This Page (optional)	▶	425.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1334 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. AARON LIVNEY		Date of Receipt
	Mailing Address 215 ASH LN		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 0 1 / 2 0 1 0
	City	State	Zip Code
	LAFAYETTE HL	PA	19444-2101
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation PROGRAMMER	Transaction ID: SA11.13961116
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 235.00	Amount of Each Receipt this Period <input type="text"/> 50.00
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) MR. DONALD LJUNGREN		Date of Receipt
	Mailing Address 2165 SUGAR PINE DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 9 / 2 0 1 0
	City	State	Zip Code
	CAMBRIDGE	MN	55008-2378
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer RETIRED		Occupation RETIRED	Transaction ID: SA11.13931729
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 320.00	Amount of Each Receipt this Period <input type="text"/> 60.00
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) MR. CHRIS M. LLOYD		Date of Receipt
	Mailing Address 11742 OLDE COVINGTON WAY		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 8 / 2 0 1 0
	City	State	Zip Code
	GLEN ALLEN	VA	23059-5741
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer PARSONS BRINCKERHOFF, INC.		Occupation TRANSPORTATION PLANNER	Transaction ID: SA11.13934168
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 226.00	Amount of Each Receipt this Period <input type="text"/> 50.00
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 160.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1335 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. CHRIS M. LLOYD

Mailing Address 11742 OLDE COVINGTON WAY

City State Zip Code
GLEN ALLEN VA 23059-5741

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PARSONS BRINCKERHOFF, INC. TRANSPORTATION PLANNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 226.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935943

Amount of Each Receipt this Period
1.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
JACK R. LLOYD

Mailing Address 918 GOLDEN BEECH DR.

City State Zip Code
BROOKVILLE OH 45309-8626

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED FINANCIAL PROFESSIONAL

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935481

Amount of Each Receipt this Period
101.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. RICHARD F. LOCKE

Mailing Address 10 W BROOKE DR.

City State Zip Code
NOVATO CA 94947-3642

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956710

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

302.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1336 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. STEPHEN LOCKE		Date of Receipt
	Mailing Address 53 WINSTEAD AVE		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	DEDHAM	MA	02026-6347
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13934583
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="15.00"/>
		<input type="text" value="240.00"/>	CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MR. STEPHEN LOCKE		Date of Receipt
	Mailing Address 53 WINSTEAD AVE		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	DEDHAM	MA	02026-6347
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13957031
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="10.00"/>
		<input type="text" value="240.00"/>	CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MR. STEPHEN LOCKE		Date of Receipt
	Mailing Address 53 WINSTEAD AVE		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	DEDHAM	MA	02026-6347
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13958837
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="10.00"/>
		<input type="text" value="240.00"/>	CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="35.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1337 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. NELLIE LOCKSA

Mailing Address 19807 N SIGNAL BUTTE CIR.

City State Zip Code
SUN CITY AZ 85373-1221

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 685.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13928605

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. JOANNE A. LOCKWOOD

Mailing Address 169 THELMA DR

City State Zip Code
BATTLE CREEK MI 49014-7831

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13964647

Amount of Each Receipt this Period
15.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOSEPH J. LODOVIC

Mailing Address 451 OAK BROOK

City State Zip Code
NEW BRAUNFELS TX 78132-3861

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951655

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 165.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1338 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT LOGAN

Mailing Address 4722 ARMANDALE AVE. N. W.

City State Zip Code
CANTON OH 44718-2279

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
W.L. LOGAN TRUCKING CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942991

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ALBERT P. LOGIURATO

Mailing Address 7A HERITAGE CRST

City State Zip Code
SOUTHBURY CT 06488-1368

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949289

Amount of Each Receipt this Period
35.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ALBERT P. LOGIURATO

Mailing Address 7A HERITAGE CRST

City State Zip Code
SOUTHBURY CT 06488-1368

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952704

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1060.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1339 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. LEO H. LOHRMAN

Mailing Address 34 POPLAR STREET

City State Zip Code
STRATFORD CT 06614-5012

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	5	/	2	0	1	0

Transaction ID: SA11.13931389

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. FRANCIS A. LOMBARDO

Mailing Address 7 WAINWRIGHT RD.
UNIT 20

City State Zip Code
WINCHESTER MA 01890-2372

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
426.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13934799

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. JOSEPH LOMBARD

Mailing Address PO BOX 112

City State Zip Code
GLOUCESTER PT VA 23062-0112

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED
Occupation DENTIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	1	0

Transaction ID: SA11.13968506

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **400.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1340 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. PHYLLIS A. LOMBARDI

Mailing Address **4132 W FRANKLIN AVENUE**

City **BURBANK** State **CA** Zip Code **91505-4006**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BLUE SHIELD OF CALIF.** Occupation **SENIOR ACCOUNT REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt **10 / 19 / 2010**

Transaction ID: SA11.13942494

Amount of Each Receipt this Period **500.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PATRICK M. LONERGAN

Mailing Address **PO BOX 299**

City **MENDHAM** State **NJ** Zip Code **07945-0299**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **10 / 29 / 2010**

Transaction ID: SA11.13959099

Amount of Each Receipt this Period **150.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DARRYL LONG

Mailing Address **27668 E KATY TRACK RD.**

City **WALKER** State **MO** Zip Code **64790-9198**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **303.00**

Date of Receipt **10 / 26 / 2010**

Transaction ID: SA11.13957229

Amount of Each Receipt this Period **51.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **701.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1341 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DARRYL LONG

Mailing Address 27668 E KATY TRACK RD.

City State Zip Code
WALKER MO 64790-9198

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
303.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13972926

Amount of Each Receipt this Period

51.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
JAMES E. LONG

Mailing Address P.O. BOX 907

City State Zip Code
STARKVILLE MS 39760-0907

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
251.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956195

Amount of Each Receipt this Period

51.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. MORRIS A. LONG

Mailing Address 4473 YACHT HARBOR DR

City State Zip Code
NAPLES FL 34112-4216

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
571.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948566

Amount of Each Receipt this Period

151.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

253.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1342 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MORRIS A. LONG

Mailing Address 4473 YACHT HARBOR DR

City State Zip Code
NAPLES FL 34112-4216

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 571.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13962877

Amount of Each Receipt this Period
180.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT E. LONG

Mailing Address 701 SPRINGER MOUNTAIN DR

City State Zip Code
CANTON GA 30114-4346

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 341.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13946783

Amount of Each Receipt this Period
201.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RICHARD E. LONGMIRE

Mailing Address 38421 BRANDYWINE AVE

City State Zip Code
PALM DESERT CA 92211-1557

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
11 / 19 / 2010

Transaction ID: SA11.13970063

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **431.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1343 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
LARRY J. LONGSHORE

Mailing Address 13400 5TH CORPS LN

City State Zip Code
FREDERICKSBURG VA 22407-1967

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 18 / 2010

Transaction ID: SA11.13971375

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
JAMES LOONEY

Mailing Address 1118 COLLINS LN

City State Zip Code
FRANKFORT KY 40601-4308

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 28 / 2010

Transaction ID: SA11.13960370

Amount of Each Receipt this Period

40.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. PHILLIP J. LORBETT

Mailing Address 1121 EVERETT AVE

City State Zip Code
OAKLAND CA 94602-1331

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
620.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 18 / 2010

Transaction ID: SA11.13929006

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

250.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1344 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOHN R. LORBIECKI

Mailing Address 541 E GRAND AVENUE

City State Zip Code
ROSHOLT WI 54473-9537

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13943049

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT A. LORD

Mailing Address 44 JANE RD

City State Zip Code
METHUEN MA 01844-3914

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955491

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. LAWRENCE A. LOSEY

Mailing Address 816 COX ROAD

City State Zip Code
INDEPENDENCE KY 41051-9316

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 242.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952799

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 225.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1345 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. PAMELA B. LOTT

Mailing Address 715 KISKATOM LN

City State Zip Code
MANDEVILLE LA 70471-1625

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945386

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ALFRED LOTZ

Mailing Address 1101 S SCHUMAKER DR. APT. 110

City State Zip Code
SALISBURY MD 21804-9240

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
217.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934293

Amount of Each Receipt this Period
52.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JACK E. LOUDENSLAGER

Mailing Address 15 CROCKETT DR

City State Zip Code
CLYDE OH 43410-9503

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13931330

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **202.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1346 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. CHARLES W. LOUFEK, JR.

Mailing Address 6600 INTERLACHEN BLVD.

City State Zip Code
MINNEAPOLIS MN 55436-1006

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956745

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
LEAH LOUGH

Mailing Address 2321 N QUANTICO ST

City State Zip Code
ARLINGTON VA 22205-2015

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951406

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. LESLE N. LOUGHRIDGE

Mailing Address 13705 RICEGRASS PLACE NE

City State Zip Code
ALBUQUERQUE NM 87111-8293

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2385.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956619

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1347 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. MERWIN W. LOUHI

Mailing Address 2922 E ORAIBI DR

City PHOENIX State AZ Zip Code 85050-8007

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13952158
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. MERWIN W. LOUHI

Mailing Address 2922 E ORAIBI DR

City PHOENIX State AZ Zip Code 85050-8007

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 11 / 08 / 2010
Transaction ID: SA11.13967128
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. EDWARD A. LOUIS

Mailing Address 645 N WREN AVE

City PALATINE State IL Zip Code 60067-3544

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13941094
Amount of Each Receipt this Period: 300.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 380.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1348 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
JAMES LOVING

Mailing Address 15 LUPINE DR

City State Zip Code
STAFFORD VA 22556-6612

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936149

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. DAVID S. LOWDERMILK, JR.

Mailing Address 707 DEVON LANE

City State Zip Code
WALLINGFORD PA 19086-6919

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13957952

Amount of Each Receipt this Period
300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
ELIZABETH H. LOWE

Mailing Address 709 LATIMER ROAD

City State Zip Code
SANTA MONICA CA 90402-1015

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13942511

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1400.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1349 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
REV. GLYN LOWERY, JR.
Mailing Address P.O. BOX 11008

City State Zip Code
PENSACOLA FL 32524-1008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 291.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13948359

Amount of Each Receipt this Period
1.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RANDALL LOWRY
Mailing Address 14505 TORREY CHASE BLVD. STE.

City State Zip Code
HOUSTON TX 77014-1024

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UNION GAS CORP OIL & GAS EXECUTIVE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2740.00

Date of Receipt
MM / DD / YYYY
11 / 18 / 2010

Transaction ID: SA11.13971340

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GEORGE R. LOWSON
Mailing Address 2453 LOMA VISTA STREET

City State Zip Code
PASADENA CA 91104-3404

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 261.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13933154

Amount of Each Receipt this Period
51.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **552.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1350 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. HAL LOWTHER	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 41 FISKE AVE	Transaction ID: SA11.13951554
	City LYNN State MA Zip Code 01902-1603	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

B.	Full Name (Last, First, Middle Initial) MS. JEANNETTE S. LOZIER	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 36 7TH. ST.	Transaction ID: SA11.13937249
	City NEWINGTON State CT Zip Code 06111-3309	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 445.00	

C.	Full Name (Last, First, Middle Initial) MR. PAUL A. LOZZI	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 8813 COVEY RISE CT	Transaction ID: SA11.13951614
	City CHARLOTTE State NC Zip Code 28226-2649	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional)	▶	240.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1351 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) EDWIN DUANE LUALLIN	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 3601 AUTUMN LN.	Transaction ID: SA11.13960192
	City State Zip Code BAYTOWN TX 77521-2704	Amount of Each Receipt this Period 115.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

B.	Full Name (Last, First, Middle Initial) RONALD W. LUBATTI	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 378 RIVER RD.	Transaction ID: SA11.13933978
	City State Zip Code LEBANON ME 04027-4013	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) RONALD W. LUBATTI	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 378 RIVER RD.	Transaction ID: SA11.13936199
	City State Zip Code LEBANON ME 04027-4013	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)	▶	135.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1352 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
RONALD W. LUBATTI

Mailing Address 378 RIVER RD.

City State Zip Code
LEBANON ME 04027-4013

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	1	0

Transaction ID: SA11.13946041

Amount of Each Receipt this Period

20.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RONALD W. LUBATTI

Mailing Address 378 RIVER RD.

City State Zip Code
LEBANON ME 04027-4013

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	1	0

Transaction ID: SA11.13946507

Amount of Each Receipt this Period

15.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RONALD W. LUBATTI

Mailing Address 378 RIVER RD.

City State Zip Code
LEBANON ME 04027-4013

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	8	/	2	0	1	0

Transaction ID: SA11.13971312

Amount of Each Receipt this Period

10.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

45.00

TOTAL This Period (last page this line number only) ►

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1353 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. HENRY A. LUBSEN
Mailing Address 2150 SPYGLASS HILL

City State Zip Code
CENTER VALLEY PA 18034-8912

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFILIAS CEO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961229

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. PRESTON L. LUCAS
Mailing Address 190 EARLY STREET

City State Zip Code
WELLSVILLE NY 14895-1312

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952756

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. MICHAEL A. LUCK
Mailing Address 1712 S 10TH ST

City State Zip Code
SAINT LOUIS MO 63104-3936

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PLANNED FUTURES OWNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13931257

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

5200.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1354 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. DONALD D. LUCKETT

Mailing Address 106 EASTDALE LN

City State Zip Code
DICKSON TN 37055-2960

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929129

Amount of Each Receipt this Period

85.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. TODD R. LUEDEKE

Mailing Address 204 FAIRWAY

City State Zip Code
WAYNE NE 68787-7112

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED NURSE/RN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941613

Amount of Each Receipt this Period

101.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
JENNIFER LUKAWSKI

Mailing Address 503 IVY CIRCLE

City State Zip Code
ALEXANDRIA VA 22302-4001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BGR GROUP GOVERNMENT AFFAIRS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959395

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

436.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1355 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DAVID P. LUMM	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 250 FRANKLIN TPKE APT. 112	Transaction ID: SA11.13933020
	City MAHWAH State NJ Zip Code 07430-1855	Amount of Each Receipt this Period 101.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 231.00	

B.	Full Name (Last, First, Middle Initial) MR. JAMES A. LUNA	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 430 PETTYJOHN ROAD	Transaction ID: SA11.13937414
	City KINGSFORT State TN Zip Code 37664-4712	Amount of Each Receipt this Period 105.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 260.00	

C.	Full Name (Last, First, Middle Initial) GRETCHEN LUNDBERG	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 202 PINE HILL RD	Transaction ID: SA11.13950401
	City NEW FAIRFIELD State CT Zip Code 06812-2208	Amount of Each Receipt this Period 110.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 320.00	

SUBTOTAL of Receipts This Page (optional)	316.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1356 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOHN D. LUNDY, JR.
Mailing Address P.O. BOX 318

City State Zip Code
STOWELL TX 77661-0318

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 521.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944596
Amount of Each Receipt this Period
40.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MURIEL L. LUNDY
Mailing Address 19076 NORTH 85TH LANE

City State Zip Code
PEORIA AZ 85382-8712

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956618
Amount of Each Receipt this Period
100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. CHAD LUNT
Mailing Address 252 E ADAM LANE

City State Zip Code
WASHINGTON UT 84780-2145

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 660.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962730
Amount of Each Receipt this Period
410.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **550.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1357 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
WARNER C. LUSARDI

Mailing Address 1570 LINDA VISTA DR

City State Zip Code
SAN MARCOS CA 92078-3808

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
11 / 08 / 2010

Transaction ID: SA11.13966613

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ELGIE C. LUSE

Mailing Address 21501 W 70TH STREET

City State Zip Code
SHAWNEE KS 66218-9685

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13963709

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. KATHRYN LUSK

Mailing Address 64514 MOUNT GLEN RD

City State Zip Code
LA GRANDE OR 97850-5171

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
485.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13941778

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1240.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1358 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. KATHRYN LUSK	Date of Receipt MM / DD / YYYY 11 / 08 / 2010
	Mailing Address 64514 MOUNT GLEN RD	Transaction ID: SA11.13966868
	City State Zip Code LA GRANDE OR 97850-5171	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 485.00	

B.	Full Name (Last, First, Middle Initial) MR. SCOT J. LUTHER	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 3903 BELLAIRE BLVD STE A	Transaction ID: SA11.13918503
	City State Zip Code HOUSTON TX 77025-1119	Amount of Each Receipt this Period 260.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer LUTHER PROPERTIES	Occupation PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

C.	Full Name (Last, First, Middle Initial) MR. HOWARD W. LUTNICK	Date of Receipt MM / DD / YYYY 10 / 29 / 2010
	Mailing Address 157 E 57TH STREET	Transaction ID: SA11.13959404
	City State Zip Code NEW YORK NY 10022	Amount of Each Receipt this Period 10000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer CANTOR FITZGERALD	Occupation CHAIRMAN & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

SUBTOTAL of Receipts This Page (optional)	10285.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1359 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. JOHN W. LUTTRELL
Mailing Address 494 SHORELINE DR.
City DECATUR State IL Zip Code 62521-5512
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 201.00
Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13939808
Amount of Each Receipt this Period 1.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DONALD A. LUTZ
Mailing Address P.O. BOX 1467
City ROSEVILLE State CA Zip Code 95678-8467
FEC ID number of contributing federal political committee. **C**
Name of Employer KENCO ENGINEERING Occupation WENZ PART BUSINESS
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00
Date of Receipt 10 / 21 / 2010
Transaction ID: SA11.13946886
Amount of Each Receipt this Period 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RAY G. LUTZ
Mailing Address 4318 WILDERNESS TRL.
City PUEBLO State CO Zip Code 81008-1819
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00
Date of Receipt 11 / 01 / 2010
Transaction ID: SA11.13962888
Amount of Each Receipt this Period 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 151.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1360 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RAY LYDA
Mailing Address 4778 GRANNY APPLE RD.
City LAURENS State SC Zip Code 29360-4776
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 355.00
Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13950510
Amount of Each Receipt this Period 35.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CHRISTOPHER J. LYNCH
Mailing Address 601 SLADE RD
City SELAH State WA Zip Code 98942-9204
FEC ID number of contributing federal political committee. **C**
Name of Employer FEDERAL GOVERNMENT Occupation CIVIL ENGINEER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00
Date of Receipt 11 / 01 / 2010
Transaction ID: SA11.13961102
Amount of Each Receipt this Period 40.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES T. LYNCH
Mailing Address 1 SIGNAL RIDGE WAY
City E GREENWICH State RI Zip Code 02818-1649
FEC ID number of contributing federal political committee. **C**
Name of Employer DANS MANAGEMENT Occupation PRESIDENT & C.E.O.
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1300.00
Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13939028
Amount of Each Receipt this Period 500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 575.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1361 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. LAVERN LYNCH

Mailing Address 752 VIA ZAMORA

City State Zip Code
CAMARILLO CA 93010-9116

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13947797

Amount of Each Receipt this Period
75.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. NELLIE A. LYNCH

Mailing Address P.O. BOX 330045

City State Zip Code
ATLANTIC BCH FL 32233-0045

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 291.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13960107

Amount of Each Receipt this Period
101.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. SANDRA T. LYNCH

Mailing Address 14 BELL BLUFF CT

City State Zip Code
GAITHERSBURG MD 20879-1115

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962560

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **276.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1362 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. DONALD R. LYONS

Mailing Address 29 COLLINS CIR

City State Zip Code
HANOVER PA 17331-3448

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2010

Transaction ID: SA11.13957685

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
RICHARD D. LYONS

Mailing Address 608 RIO GRANDE LOOP

City State Zip Code
GEORGETOWN TX 78633-4798

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 19 / 2010

Transaction ID: SA11.13940598

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. HOMER E. LYTLE

Mailing Address 4655 E DELTA AVE

City State Zip Code
MESA AZ 85206-5018

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
236.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 18 / 2010

Transaction ID: SA11.13936524

Amount of Each Receipt this Period
1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **141.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1363 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
KEVIN MABIE

Mailing Address 2056 BEACON HEIGHTS DR

City RESTON State VA Zip Code 20191-4847

FEC ID number of contributing federal political committee. **C**

Name of Employer VALADOR, INC. Occupation CONTRACTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13931840
Amount of Each Receipt this Period: 450.00
CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. BOB MAC ELHINEY

Mailing Address 144 TANAGER CIR STE F

City GREER State SC Zip Code 29650

FEC ID number of contributing federal political committee. **C**

Name of Employer ACADEMY OF HAIR TECHNOLOGY Occupation VICE PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1010.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13931693
Amount of Each Receipt this Period: 1010.00
CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. GRACE P. MAC KAY

Mailing Address 827 CARILLON DR UNIT 320

City BARTLETT State IL Zip Code 60103-4687

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 11 / 22 / 2010
Transaction ID: SA11.13972785
Amount of Each Receipt this Period: 150.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1610.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1364 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JOHN MACARTHUR

Mailing Address 2934 S 34TH ST

City State Zip Code
MILWAUKEE WI 53215-3550

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13960016

Amount of Each Receipt this Period
20.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. GEORGE P. MACDONOUGH

Mailing Address 47 CHERRY HILL DR
APT. 102

City State Zip Code
CONROE TX 77304

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962500

Amount of Each Receipt this Period
400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. GORDON E. MACDONALD

Mailing Address 5413 INGLEWOOD DR

City State Zip Code
CORPUS CHRISTI TX 78415-3320

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952385

Amount of Each Receipt this Period
75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

495.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1365 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. PAUL E. MACDONALD

Mailing Address 1515 WILSON BLVD STE 710

City State Zip Code
ARLINGTON VA 22209-2434

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
META ENGINEERS PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13947743
Amount of Each Receipt this Period: 1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. NICHOLAS MACERO

Mailing Address 71 NORTH ST.

City State Zip Code
SOMERVILLE MA 02144-1127

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 11 / 18 / 2010
Transaction ID: SA11.13971346
Amount of Each Receipt this Period: 75.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ALBERT MACFARLANE

Mailing Address 203 W PEMBREY DR

City State Zip Code
WILMINGTON DE 19803-2008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt: 11 / 02 / 2010
Transaction ID: SA11.13962659
Amount of Each Receipt this Period: 260.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1335.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1366 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL MACHAC, JR.
Mailing Address 718 HABHEGGER AVE.
City SPARTA State WI Zip Code 54656-1318
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 472.00
Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13948864
Amount of Each Receipt this Period 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. BYRON C. MACHEN
Mailing Address 6017 GREYSTONE PL
City MONTGOMERY State AL Zip Code 36117-2629
FEC ID number of contributing federal political committee. **C**
Name of Employer MONTGOMERY RADIOLOGY ASSO-C. Occupation PHYSICIAN
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 11 / 02 / 2010
Transaction ID: SA11.13962644
Amount of Each Receipt this Period 500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERTO MACIAS
Mailing Address 3247 LUCILE AVE
City CLIFTON State CO Zip Code 81520-7888
FEC ID number of contributing federal political committee. **C**
Name of Employer PNCI CONSTRUCTION Occupation LABOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13949065
Amount of Each Receipt this Period 100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 700.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1367 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DAVID A. MACK	Date of Receipt MM / DD / YYYY 11 / 04 / 2010
	Mailing Address 1890 CAUSS HWY	Transaction ID: SA11.13965626
	City State Zip Code FAIRFIELD CT 06824	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) MR. EDWARD G. MACK	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 1804 CREEKSIDE CT.	Transaction ID: SA11.13948183
	City State Zip Code DARIEN IL 60561-5300	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4900.00	

C.	Full Name (Last, First, Middle Initial) MR. JAMES EDWARD MACK	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 701 KIM FARM BLVD APT 203	Transaction ID: SA11.13959752
	City State Zip Code ROCKVILLE MD 20850	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 295.00	

SUBTOTAL of Receipts This Page (optional)	▶	2850.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1368 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DR. KIRWIN T. MACMILLAN

Mailing Address 5 PARISH SQUARE

City	State	Zip Code
ATKINSON	NH	03811-2465

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946711

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DR. KIRWIN T. MACMILLAN

Mailing Address 5 PARISH SQUARE

City	State	Zip Code
ATKINSON	NH	03811-2465

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961689

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. RICHARD F. MADDEN

Mailing Address 6703 DIANN ST. NE

City	State	Zip Code
OLYMPIA	WA	98516-9323

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 821.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956704

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

300.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1369 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) HENRY MADLEY		Date of Receipt
	Mailing Address 3648 62ND AVE E		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City BRADENTON	State FL	Zip Code 34203-5429
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13934617
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="6101.00"/>	<input type="text" value="200.00"/>
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) HENRY MADLEY		Date of Receipt
	Mailing Address 3648 62ND AVE E		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City BRADENTON	State FL	Zip Code 34203-5429
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13935959
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="6101.00"/>	<input type="text" value="1.00"/>
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) HENRY MADLEY		Date of Receipt
	Mailing Address 3648 62ND AVE E		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City BRADENTON	State FL	Zip Code 34203-5429
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13940905
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="6101.00"/>	<input type="text" value="200.00"/>
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1370 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
HENRY MADLEY
Mailing Address 3648 62ND AVE E
City BRADENTON State FL Zip Code 34203-5429
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 6101.00
Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13950384
Amount of Each Receipt this Period 200.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
HENRY MADLEY
Mailing Address 3648 62ND AVE E
City BRADENTON State FL Zip Code 34203-5429
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 6101.00
Date of Receipt 10 / 26 / 2010
Transaction ID: SA11.13956699
Amount of Each Receipt this Period 400.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HENRY MADLEY
Mailing Address 3648 62ND AVE E
City BRADENTON State FL Zip Code 34203-5429
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 6101.00
Date of Receipt 11 / 19 / 2010
Transaction ID: SA11.13972032
Amount of Each Receipt this Period 200.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 800.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1371 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. MARY A. MADLEY

Mailing Address 3648 62ND AVE. E

City BRADENTON State FL Zip Code 34203-5429

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5720.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13935023
 Amount of Each Receipt this Period: 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MARY A. MADLEY

Mailing Address 3648 62ND AVE. E

City BRADENTON State FL Zip Code 34203-5429

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5720.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13940906
 Amount of Each Receipt this Period: 200.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. MARY A. MADLEY

Mailing Address 3648 62ND AVE. E

City BRADENTON State FL Zip Code 34203-5429

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5720.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13954774
 Amount of Each Receipt this Period: 200.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 500.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1372 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. MARY A. MADLEY

Mailing Address 3648 62ND AVE. E

City BRADENTON State FL Zip Code 34203-5429

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5720.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13956713
 Amount of Each Receipt this Period: 900.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MARY A. MADLEY

Mailing Address 3648 62ND AVE. E

City BRADENTON State FL Zip Code 34203-5429

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5720.00

Date of Receipt: 11 / 19 / 2010
Transaction ID: SA11.13972031
 Amount of Each Receipt this Period: 200.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WAYNE A. MADSEN

Mailing Address 6820 N LEOTI AVE

City CHICAGO State IL Zip Code 60646-1305

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation LANDLORD

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt: 11 / 08 / 2010
Transaction ID: SA11.13966858
 Amount of Each Receipt this Period: 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1150.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1373 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. DONNA MAGGIO	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 1 0
	Mailing Address 5368 FENNWOOD DR	Transaction ID: SA11.13951464
	City State Zip Code ZACHARY LA 70791-2438	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 390.00

B.	Full Name (Last, First, Middle Initial) MR. DAN MAGGS	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 9 / 2 0 1 0
	Mailing Address 10603 LOCKERBIE DR	Transaction ID: SA11.13940220
	City State Zip Code AUSTIN TX 78750-4035	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 375.00

C.	Full Name (Last, First, Middle Initial) MR. DAN MAGGS	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 2 / 2 0 1 0
	Mailing Address 10603 LOCKERBIE DR	Transaction ID: SA11.13949965
	City State Zip Code AUSTIN TX 78750-4035	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 375.00

SUBTOTAL of Receipts This Page (optional)	▶	210.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1374 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
O V. MAGLIO

Mailing Address 7 CHUKKA WAY

City State Zip Code
FAR HILLS NJ 07931-2477

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PSYCHOTHERAPIST

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 1 0

Transaction ID: SA11.13966879

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DR. GEORGE J. MAGOVERN

Mailing Address 251 OLD MILL RD.

City State Zip Code
PITTSBURGH PA 15238-1939

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GEORGE MAGOVERN MD PHYSICIAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13947814

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
COL. ROBERT B. MAGRUDER

Mailing Address 2615 STEEPLECHASE DR

City State Zip Code
RESTON VA 20191-2130

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INSTITUTION FOR DEFENSE ANALYSES ADJUNCT STAFF

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946840

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

700.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1375 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. GERALD J. MAHALKO	Date of Receipt MM / DD / YYYY 11 / 16 / 2010
	Mailing Address 22293 MONTERA DR.	Transaction ID: SA11.13969225
	City State Zip Code SALINAS CA 93908-1025	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 386.00	

B.	Full Name (Last, First, Middle Initial) MRS. CAROL A. MAHAN	Date of Receipt MM / DD / YYYY 10 / 24 / 2010
	Mailing Address 1696 CROWN RIDGE CT	Transaction ID: SA11.13947691
	City State Zip Code WESTLAKE VILLAGE CA 91362-4731	Amount of Each Receipt this Period 110.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00	

C.	Full Name (Last, First, Middle Initial) MR. ROGER A. MAHAN	Date of Receipt MM / DD / YYYY 11 / 02 / 2010
	Mailing Address 2705 RUSSELL RD.	Transaction ID: SA11.13962656
	City State Zip Code ALEXANDRIA VA 22305-1713	Amount of Each Receipt this Period 155.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	

SUBTOTAL of Receipts This Page (optional)	290.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1376 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. C. PAUL MAILLOUX

Mailing Address P.O. BOX 129

City State Zip Code
BEAR CREEK PA 18602-0129

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13939783

Amount of Each Receipt this Period
20.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT MAIN

Mailing Address 3607 S 14TH ST.

City State Zip Code
ALEXANDRIA VA 22302-1001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2551.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13939859

Amount of Each Receipt this Period
1.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT MAIN

Mailing Address 3607 S 14TH ST.

City State Zip Code
ALEXANDRIA VA 22302-1001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2551.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13940818

Amount of Each Receipt this Period
615.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **636.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1377 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DAVID J. MAITLAND

Mailing Address 231 FISHER DR

City State Zip Code
COUDERSPORT PA 16915-7801

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
470.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13957644

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAVID MAJCHER

Mailing Address 4521 SWILCAN BRIDGE LN N

City State Zip Code
JACKSONVILLE FL 32224-5618

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation DIRECTOR OF TECH OPERATION

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938469

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID MAJCHER

Mailing Address 4521 SWILCAN BRIDGE LN N

City State Zip Code
JACKSONVILLE FL 32224-5618

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation DIRECTOR OF TECH OPERATION

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 2 0 / 2 0 1 0

Transaction ID: SA11.13971531

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **300.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1378 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. HISH MAJZOUB

Mailing Address 2902 MC CLELLAND BLVD # B7

City JOPLIN State MO Zip Code 64804

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt 10 / 18 / 2010

Transaction ID: SA11.13933019

Amount of Each Receipt this Period 151.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. HISH MAJZOUB

Mailing Address 2902 MC CLELLAND BLVD # B7

City JOPLIN State MO Zip Code 64804

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt 11 / 18 / 2010

Transaction ID: SA11.13971342

Amount of Each Receipt this Period 150.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. KAY G. MALAFIS

Mailing Address 143 80TH ST

City BROOKLYN State NY Zip Code 11209-3513

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt 10 / 19 / 2010

Transaction ID: SA11.13931677

Amount of Each Receipt this Period 25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 326.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1379 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. STEVEN J. MALCOLM

Mailing Address 4026 SOUTH YORKTOWN PLACE

City State Zip Code
TULSA OK 74105-3416

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WILLIAMS ENERGY PRESIDENT, CHAIRMAN, AND CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	1	0

Transaction ID: SA11.13945239

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. LEONARD MALDONADO

Mailing Address 2731 FILLMORE AVE

City State Zip Code
EL PASO TX 79930-2502

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	6	/	2	0	1	0

Transaction ID: SA11.13956578

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
LAVERNE MALEY

Mailing Address P.O. BOX 519

City State Zip Code
CARLSBAD NM 88221-0519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
VISION ENERGY, INC. EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13928924

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

1600.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1380 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ALLAN H. MALIK

Mailing Address 29070 PEPPERGRASS AVE

City State Zip Code
MENIFEE CA 92584-7207

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13953367

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. CLAUDIA V. MALLANDER

Mailing Address 43 RIDGE STREET
APARTMENT 511

City State Zip Code
GLENS FALLS NY 12801-3657

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 280.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	1	0

Transaction ID: SA11.13940807

Amount of Each Receipt this Period
45.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. CLAUDIA V. MALLANDER

Mailing Address 43 RIDGE STREET
APARTMENT 511

City State Zip Code
GLENS FALLS NY 12801-3657

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 280.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	1	0

Transaction ID: SA11.13958361

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

170.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1381 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. CLAUDIA V. MALLANDER	Date of Receipt MM / DD / YYYY 11 / 08 / 2010
	Mailing Address 43 RIDGE STREET APARTMENT 511	Transaction ID: SA11.13966971
	City State Zip Code GLENS FALLS NY 12801-3657	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

B.	Full Name (Last, First, Middle Initial) MR. WILLIAM R. MALLETTE	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 7710 PARTRIDGE WOODS COVE	Transaction ID: SA11.13949870
	City State Zip Code CORDOVA TN 38016-5714	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation ST JOE PAPER COMPANY SALES REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

C.	Full Name (Last, First, Middle Initial) MR. WILLIAM R. MALLETTE	Date of Receipt MM / DD / YYYY 11 / 05 / 2010
	Mailing Address 7710 PARTRIDGE WOODS COVE	Transaction ID: SA11.13966188
	City State Zip Code CORDOVA TN 38016-5714	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation ST JOE PAPER COMPANY SALES REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1382 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. WILLIAM T. MALLISON

Mailing Address 156 MEADOW LAKE DR

City State Zip Code
HENDERSONVILLE TN 37075-5538

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 226.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949105

Amount of Each Receipt this Period
20.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DR. JAY P. MALMQUIST

Mailing Address 5415 SW WESTGATE DR STE L7

City State Zip Code
PORTLAND OR 97221-2409

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JAY P MALMQUIST DMD PC SURGEON

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929756

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DR. LEON S. MALMUD

Mailing Address 971 FRAZIER RD

City State Zip Code
RYDAL PA 19046-2407

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TEMPLE UNIV HOSPITAL PHYSICIAN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 415.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13942286

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **320.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1383 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GREGG MAMIKUNIAN

Mailing Address 705 N. MAPLE DRIVE

City State Zip Code
BEVERLY HILLS CA 90210-3480

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 20000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13957945

Amount of Each Receipt this Period
10000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CHARLES G. MANDER

Mailing Address 24 WILCOX PL

City State Zip Code
FAIR LAWN NJ 07410-5516

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951349

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HARRY L. MANDEL

Mailing Address 2673 PYES HARBOUR

City State Zip Code
WEST PALM BCH FL 33411-5525

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943538

Amount of Each Receipt this Period
30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 10130.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1384 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. HARRY L. MANDEL

Mailing Address 2673 PYES HARBOUR

City State Zip Code
WEST PALM BCH FL 33411-5525

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 255.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957135

Amount of Each Receipt this Period
15.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. HARRY L. MANDEL

Mailing Address 2673 PYES HARBOUR

City State Zip Code
WEST PALM BCH FL 33411-5525

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 255.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13962232

Amount of Each Receipt this Period
30.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DENNIS MANELSKI

Mailing Address ONE BRYANT PARK

City State Zip Code
NEW YORK NY 10036-6728

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BANK OF AMERICA/MERRILL LYNCH INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13951065

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 2045.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1385 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. THOMAS P. MANEY

Mailing Address 535 GREENGLADE AVE

City State Zip Code
WORTHINGTON OH 43085-2291

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 202.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13960095

Amount of Each Receipt this Period
101.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. GRACE MANGAN

Mailing Address 110 TAFT DRIVE

City State Zip Code
BRICK NJ 08724-2726

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950984

Amount of Each Receipt this Period
30.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. GRACE MANGAN

Mailing Address 110 TAFT DRIVE

City State Zip Code
BRICK NJ 08724-2726

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950991

Amount of Each Receipt this Period
1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 132.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1386 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. ANNETTE MANGUM	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 4721 CROSSWINDS DR	Transaction ID: SA11.13955779
	City State Zip Code WILMINGTON NC 28409-8940	Amount of Each Receipt this Period 70.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation UNEMPLOYED UNEMPLOYED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	

B.	Full Name (Last, First, Middle Initial) MR. ANDREW MANN	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 9900 GLOUCESTER AVE	Transaction ID: SA11.13928102
	City State Zip Code IOLA TX 77861-4582	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SELF-EMPLOYED SELF-EMPLOYED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 430.00	

C.	Full Name (Last, First, Middle Initial) MR. STEVEN M. MANNETTER	Date of Receipt MM / DD / YYYY 11 / 02 / 2010
	Mailing Address 21294 305TH STREET	Transaction ID: SA11.13962690
	City State Zip Code HUBBARD IA 50122-8611	Amount of Each Receipt this Period 160.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

SUBTOTAL of Receipts This Page (optional)	▶	330.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1387 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. DUANE C. MANNING

Mailing Address 650 WOODWARD ST.
APT 328

City State Zip Code
SAN MARCOS CA 92069-6899

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 715.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952465

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ROBERT P. MANNING

Mailing Address 3307 WARWICK CT

City State Zip Code
WYLIE TX 75098-8538

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 435.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956365

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
WILLIAM H. MANNING, JR.

Mailing Address 90 WEST FIELD CT

City State Zip Code
GIBSONVILLE NC 27249-3341

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 361.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951436

Amount of Each Receipt this Period
35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **185.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1388 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
LORNA M. MANSFIELD

Mailing Address 1954 MAGNOLIA WAY

City State Zip Code
WALNUT CREEK CA 94595-1715

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 853.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	6		2	0	1	0

Transaction ID: SA11.13957174

Amount of Each Receipt this Period

151.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
LORNA M. MANSFIELD

Mailing Address 1954 MAGNOLIA WAY

City State Zip Code
WALNUT CREEK CA 94595-1715

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 853.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	9		2	0	1	0

Transaction ID: SA11.13972074

Amount of Each Receipt this Period

151.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
JOSEPH MONSOUR MANSUR

Mailing Address 6224 LYNN WAY

City State Zip Code
SAINT PAUL MN 55129-8401

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	5		2	0	1	0

Transaction ID: SA11.13954579

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

402.00

TOTAL This Period (last page this line number only)

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**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1389 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. JOHN MANVEL		Date of Receipt
	Mailing Address 1905 SANDS DR		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	ANNAPOLIS	MD	21409-6233
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer US NAVEL ACADEMY		Occupation ENGINEER	Transaction ID: SA11.13929025
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="300.00"/>	<input type="text" value="200.00"/>
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) GENE MAPES		Date of Receipt
	Mailing Address 562 E FAIRWAY DR.		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	KILMARNOCK	VA	22482-3621
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer RETIRED		Occupation RETIRED	Transaction ID: SA11.13935200
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="150.00"/>
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) MR. SID MARANTZ		Date of Receipt
	Mailing Address 2131 E 51ST ST		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	VERNON	CA	90058-2816
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13934803
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="300.00"/>	<input type="text" value="200.00"/>
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="550.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1390 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. DIANE R. MARBURGER

Mailing Address 1309 MARS EVANS CITY RD

City State Zip Code
EVANS CITY PA 16033-3617

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
COUNTY OF BUTLER COUNTY TREASURER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13948155
Amount of Each Receipt this Period: 90.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MISS ALICE J. MARCHION

Mailing Address 114 BLODGETT ST.

City State Zip Code
BROOKFIELD VT 05036-9792

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AADCO MEDICAL INC BOOKKEEPER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt: 10 / 24 / 2010
Transaction ID: SA11.13947717
Amount of Each Receipt this Period: 1200.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. KEVIN A. MARCHISIO

Mailing Address 2186 BRITTANY BLVD.

City State Zip Code
BRUNSWICK OH 44212-4910

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13940760
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1340.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1391 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
PHYLLIS A. MARCHEFKA
Mailing Address 37 BARTON RD
City GREENFIELD State MA Zip Code 01301-9725
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 271.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13937335
Amount of Each Receipt this Period 20.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PHYLLIS A. MARCHEFKA
Mailing Address 37 BARTON RD
City GREENFIELD State MA Zip Code 01301-9725
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 271.00
Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13949511
Amount of Each Receipt this Period 20.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. SIDNEY M. MARCHASIN
Mailing Address 1301 SHOREWAY RD STE 100
City BELMONT State CA Zip Code 94002-4110
FEC ID number of contributing federal political committee. **C**
Name of Employer CATHOLIC HEALTH CARE WEST Occupation PHYSICIAN
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1050.00
Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13931545
Amount of Each Receipt this Period 200.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 240.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1392 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JOSEPH MARCUS, SR.

Mailing Address 9787 S DEER CREEK CANYON RD

City State Zip Code
LITTLETON CO 80127-9436

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 561.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963297

Amount of Each Receipt this Period

60.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JAMES H. MARDIS, JR.

Mailing Address 7161 PINEWOOD CT.

City State Zip Code
COLUMBUS GA 31909-2152

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936164

Amount of Each Receipt this Period

105.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. CYRIL T. MAREK

Mailing Address 7530 W WELLS ST

City State Zip Code
MILWAUKEE WI 53213-3134

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TRI CITY BANK LOAN OFFICER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929235

Amount of Each Receipt this Period

75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

240.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1393 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT MARESE

Mailing Address 642 10TH ST

City State Zip Code
BROOKLYN NY 11215-4502

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938551

Amount of Each Receipt this Period
205.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAMES L. MARGASON

Mailing Address 520 NE 319TH AVE

City State Zip Code
WASHOUGAL WA 98671-8434

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
236.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952915

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. EUGENE MARGOLIS

Mailing Address 900 GREENLEY RD
911

City State Zip Code
SONORA CA 95370-5287

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928937

Amount of Each Receipt this Period
150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **455.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1394 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. EUGENE MARGOLIS

Mailing Address 900 GREENLEY RD
911

City State Zip Code
SONORA CA 95370-5287

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	6	/	2	0	1	0

Transaction ID: SA11.13968515

Amount of Each Receipt this Period
150.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RUBIN MARGULES

Mailing Address 20 OCEAN CT.

City State Zip Code
BROOKLYN NY 11223

FEC ID number of contributing federal political committee. **C**

Name of Employer ARM MANAGEMENT
Occupation REAL ESTATE AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	9	/	2	0	1	0

Transaction ID: SA11.13961790

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DONNA M. MARIANO

Mailing Address 63 DWYER ST

City State Zip Code
BUFFALO NY 14224-1113

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
328.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	2	/	2	0	1	0

Transaction ID: SA11.13962562

Amount of Each Receipt this Period
85.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **485.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1395 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. GRACE E. MARINE

Mailing Address 5040 WALNUT GROVE RD

City State Zip Code
TANEYTOWN MD 21787-1378

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 246.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941573

Amount of Each Receipt this Period
86.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MARY MARINO

Mailing Address 127 WILDCAT RD.

City State Zip Code
MONTICELLO NY 12701-4126

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SULLIVAN COUNTY ACCOUNTANT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 235.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949803

Amount of Each Receipt this Period
35.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
SOLE MARITTIMI

Mailing Address 111 WOOSTER STREET 6E

City State Zip Code
NEW YORK NY 10012-3849

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JPMORGAN CHASE BANKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918844

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

371.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1396 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DAVID D. MARKERT
Mailing Address P.O. BOX 398

City State Zip Code
CENTURIA WI 54824-0398

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ST. CROIX MEM HOSP. CLINICAL PSYCHOLOGIST

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13936098
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAVID D. MARKERT
Mailing Address P.O. BOX 398

City State Zip Code
CENTURIA WI 54824-0398

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ST. CROIX MEM HOSP. CLINICAL PSYCHOLOGIST

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13953195
 Amount of Each Receipt this Period
 80.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DALE GENE MARKLAND
Mailing Address 5730 W AMHERST AVE

City State Zip Code
DALLAS TX 75209-4408

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED ATTORNEY

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13954462
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 380.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1397 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. FRANZ J. MARKOWSKI

Mailing Address 134 ORCHARD COURT

City RICHLAND State WA Zip Code 99352-9645

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 10 / 20 / 2010
Transaction ID: SA11.13943691
Amount of Each Receipt this Period 20.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GEORGE MARLATT

Mailing Address 257 BROOK ST LOWR

City SAUGATUCK State MI Zip Code 49453-9696

FEC ID number of contributing federal political committee. **C**

Name of Employer ENTERGY Occupation ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 610.00

Date of Receipt 11 / 02 / 2010
Transaction ID: SA11.13962535
Amount of Each Receipt this Period 410.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. JERRY D. MARLEY

Mailing Address 233318 N 22ND AVENUE

City NOKOMIS State IL Zip Code 62075

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt 10 / 28 / 2010
Transaction ID: SA11.13960211
Amount of Each Receipt this Period 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 480.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1398 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
ROBERT MARLING

Mailing Address 1330 LAKE ROBBINS DRIVE

City State Zip Code
THE WOODLANDS TX 77380-3266

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WOODFOREST NATIONAL BANK CHIEF EXECUTIVE OFFICER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13965103

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. ELDA MARMADUKE

Mailing Address 7444 SPRING VILLAGE DR APT 107

City State Zip Code
SPRINGFIELD VA 22150-4456

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 246.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13929906

Amount of Each Receipt this Period

1.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. ELDA MARMADUKE

Mailing Address 7444 SPRING VILLAGE DR APT 107

City State Zip Code
SPRINGFIELD VA 22150-4456

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 246.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954067

Amount of Each Receipt this Period

30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1031.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1399 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. ELDA MARMADUKE	Date of Receipt MM / DD / YYYY 11 / 18 / 2010
	Mailing Address 7444 SPRING VILLAGE DR APT 107	Transaction ID: SA11.13969655
	City State Zip Code SPRINGFIELD VA 22150-4456	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 246.00	

B.	Full Name (Last, First, Middle Initial) MS. MARY C. MAROLD	Date of Receipt MM / DD / YYYY 10 / 29 / 2010
	Mailing Address 5110 SAN FELIPE STREET UNIT 36	Transaction ID: SA11.13961885
	City State Zip Code HOUSTON TX 77056-3546	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation SELF-EMPLOYED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

C.	Full Name (Last, First, Middle Initial) MR. ANTHONY MARQUES	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 30 ANGELA DR	Transaction ID: SA11.13931601
	City State Zip Code LOS ALTOS CA 94022-3002	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	345.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1400 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
JOHN L. MARQUARDT

Mailing Address 1320 S HOME RD

City MANSFIELD State OH Zip Code 44904-3350

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13955279
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. RICHARD MARRIOTT

Mailing Address 10400 PLEASANT HILL DRIVE

City POTOMAC State MD Zip Code 20854

FEC ID number of contributing federal political committee. **C**

Name of Employer HOST HOTELS & RESORTS, INC. Occupation CHAIRMAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 11 / 16 / 2010
Transaction ID: SA11.13968764
Amount of Each Receipt this Period: 1000.00
CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. RICHARD MARRIOTT

Mailing Address 10400 PLEASANT HILL DRIVE

City POTOMAC State MD Zip Code 20854

FEC ID number of contributing federal political committee. **C**

Name of Employer HOST HOTELS & RESORTS, INC. Occupation CHAIRMAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 11 / 16 / 2010
Transaction ID: SA11.13968765
Amount of Each Receipt this Period: 1000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 2100.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1401 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. PETER MARRON

Mailing Address 30 EAST 65TH STREET

City State Zip Code
NEW YORK NY 10065-7013

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PINNACLE ASSOCIATES,LTD INVESTMENT MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 1 0

Transaction ID: SA11.13928715

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
THOMAS G. MARROW

Mailing Address P.O. BOX 1157

City State Zip Code
BORREGO SPRINGS CA 92004-1157

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 1 0

Transaction ID: SA11.13966255

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CHARLES W. MARSHALL

Mailing Address 1284 SHORES BLVD.

City State Zip Code
ROCKWALL TX 75087-2323

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 431.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948563

Amount of Each Receipt this Period
11.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1061.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1402 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DELORES MARSHALL

Mailing Address 1179 CEDAR ROAK DR.

City State Zip Code
FOREST VA 24551-4557

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 230.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 5 / 2 0 1 0

Transaction ID: SA11.13966187

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. MARIE M. MARSHALL

Mailing Address 100 RIDGESTONE RD

City State Zip Code
CHATTANOOGA TN 37411

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946649

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
PEGGY D. MARSHALL

Mailing Address 2263 PARKERS HILL DR.

City State Zip Code
MAIDENS VA 23102-2244

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943110

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1403 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ROBERT C. MARSHALL

Mailing Address 2263 PARKERS HILL DR.

City MAIDENS State VA Zip Code 23102-2244

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13943397
 Amount of Each Receipt this Period: 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. STEPHEN N. MARSHALL

Mailing Address 107 TAROLLI DRIVE

City SYRACUSE State NY Zip Code 13209-2041

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PODIATRIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA11.13931399
 Amount of Each Receipt this Period: 75.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WALTER D. MARSHALL

Mailing Address 4802 HICKORY GLEN DR

City MATTHEWS State NC Zip Code 28105-2859

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 246.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13946032
 Amount of Each Receipt this Period: 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 225.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1404 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. PAMELA C. MARTA

Mailing Address PO BOX 577

City SPEARFISH State SD Zip Code 57783-0577

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13945397

Amount of Each Receipt this Period: 110.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. CAROL J. MARTELLA

Mailing Address 1817 BANNISTER PL

City MODESTO State CA Zip Code 95355-4404

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt: MM / DD / YYYY
11 / 02 / 2010

Transaction ID: SA11.13962598

Amount of Each Receipt this Period: 105.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. KEITH L. MARTENS

Mailing Address 2080 ILLINOIS ST

City PROLE State IA Zip Code 50229-9150

FEC ID number of contributing federal political committee. **C**

Name of Employer MAYOR FARM IMP. Occupation DRIVER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 232.00

Date of Receipt: MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13948299

Amount of Each Receipt this Period: 40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 255.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1405 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. KEITH L. MARTENS

Mailing Address 2080 ILLINOIS ST

City State Zip Code
PROLE IA 50229-9150

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
MAYOR FARM IMP. DRIVER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 232.00

Date of Receipt M M / D D / Y Y Y Y
10 / 28 / 2010

Transaction ID: SA11.13959792

Amount of Each Receipt this Period
36.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. WILLI EUGEN MARTENS

Mailing Address 400 N 17TH ST

City State Zip Code
KEOKUK IA 52632-3452

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
TRI STATE MEDICAL GROUP PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt M M / D D / Y Y Y Y
10 / 21 / 2010

Transaction ID: SA11.13942545

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. WILLI EUGEN MARTENS

Mailing Address 400 N 17TH ST

City State Zip Code
KEOKUK IA 52632-3452

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
TRI STATE MEDICAL GROUP PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt M M / D D / Y Y Y Y
11 / 22 / 2010

Transaction ID: SA11.13971573

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 136.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1406 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. C. H. MARTIN

Mailing Address 45 PRESTWICK

City ODESSA State TX Zip Code 79762-5200

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 490.00

Date of Receipt: 10 / 27 / 2010
Transaction ID: SA11.13957627
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. CAROLE MARTIN

Mailing Address 29749 GLENEAGLES RD

City PERRYSBURG State OH Zip Code 43551-3519

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13931679
Amount of Each Receipt this Period: 110.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CARROLL H. MARTIN

Mailing Address 45 PRESTWICK

City ODESSA State TX Zip Code 79762-5200

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 911.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13940868
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 310.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1407 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. CLINTON MARTIN

Mailing Address 229 PATTON FARM RD.

City State Zip Code
STUARTS DRAFT VA 24477-2610

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED FARMER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 301.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948682

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. DALTON MARTIN

Mailing Address 953 PIZARRO LN

City State Zip Code
SAN MATEO CA 94404-2929

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 430.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955907

Amount of Each Receipt this Period
110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. DANIELLE S. MARTIN

Mailing Address 2750 SUNSET WAY

City State Zip Code
ERIE CO 80516-4606

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HUMANA NURSE

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 235.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918709

Amount of Each Receipt this Period
45.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

255.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1408 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. DEANNA L. MARTIN

Mailing Address PO BOX 1008

City State Zip Code
LUCASVILLE OH 45648-1008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DONNIE MARTIN HEATING & COOLING OWNER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	3	/	2	0	1	0

Transaction ID: SA11.13964439

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DENNIS P. MARTIN

Mailing Address 25 FORESTWOOD DR.

City State Zip Code
ROMEIOVILLE IL 60446-1343

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MARTIN CEMENT CO SALES

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 3000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	1	0

Transaction ID: SA11.13963682

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. EDWARD S. MARTIN

Mailing Address 1046 WOODBERRY ROAD

City State Zip Code
NEW KENSINGTON PA 15068-5308

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 4000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	6	/	2	0	1	0

Transaction ID: SA11.13956717

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **3000.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1409 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. EDWARD S. MARTIN	Date of Receipt MM / DD / YYYY 11 / 04 / 2010
	Mailing Address 1046 WOODBERRY ROAD	Transaction ID: SA11.13965473
	City State Zip Code NEW KENSINGTON PA 15068-5308	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4000.00	

B.	Full Name (Last, First, Middle Initial) ELIZABETH G. MARTIN	Date of Receipt MM / DD / YYYY 11 / 18 / 2010
	Mailing Address P.O. BOX 1503	Transaction ID: SA11.13969771
	City State Zip Code EAST ORLEANS MA 02643-1503	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer HOMEMAKER	Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 490.00	

C.	Full Name (Last, First, Middle Initial) MS. ELLEN W. MARTIN	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 4955 GLENBROOK RD NW	Transaction ID: SA11.13942580
	City State Zip Code WASHINGTON DC 20016-3222	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer HOMEMAKER	Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional)	900.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1410 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JAMES C. MARTIN

Mailing Address 34 PACE MARTIN RD.

City LAUREL State MS Zip Code 39443-2961

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 25 / 2010

Transaction ID: SA11.13954681

Amount of Each Receipt this Period: 50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. JEAN M. MARTIN

Mailing Address 888 LEE ROAD 271

City VALLEY State AL Zip Code 36854-7213

FEC ID number of contributing federal political committee. **C**

Name of Employer MILLIKEN & COMPANY Occupation GRAPHIC DESIGNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 455.00

Date of Receipt: 10 / 18 / 2010

Transaction ID: SA11.13932893

Amount of Each Receipt this Period: 56.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JERRY MARTIN

Mailing Address 1279 SO IRIS ST

City LAKEWOOD State CO Zip Code 80232-5141

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt: 11 / 09 / 2010

Transaction ID: SA11.13967190

Amount of Each Receipt this Period: 25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **131.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1411 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. JOAN E. MARTIN

Mailing Address 1000 LAKE SHORE DR

City State Zip Code
GLADSTONE MI 49837-1539

FEC ID number of contributing federal political committee. **C**

Name of Employer REAL ESTATE BROKER Occupation REAL ESTATE BROKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: MM / DD / YYYY
11 / 04 / 2010

Transaction ID: SA11.13965692

Amount of Each Receipt this Period: 60.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN MARTIN

Mailing Address P.O. BOX 50190

City State Zip Code
CASPER WY 82605-0190

FEC ID number of contributing federal political committee. **C**

Name of Employer MCMURRY ENERGY COMPANY Occupation MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: MM / DD / YYYY
10 / 14 / 2010

Transaction ID: SA11.13930706

Amount of Each Receipt this Period: 5000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOSEPH L. MARTIN

Mailing Address 7299 E ELI LILLY RD

City State Zip Code
SYRACUSE IN 46567-8713

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: MM / DD / YYYY
10 / 20 / 2010

Transaction ID: SA11.13938574

Amount of Each Receipt this Period: 160.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **5220.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1412 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. MARGARET MARTIN

Mailing Address 27495 HURON CIR APT 1011

City State Zip Code
NOVI MI 48377-3452

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945355

Amount of Each Receipt this Period
35.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MAUREEN MARTIN

Mailing Address 1748 VICTORIA WAY

City State Zip Code
SAN MARCOS CA 92069-9401

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931500

Amount of Each Receipt this Period
110.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. PATRICIA MARTIN

Mailing Address 803 WILLOW HILLS LANE

City State Zip Code
PROSPECT HEIGHTS IL 60070-2581

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918482

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **245.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1413 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ROBIN B. MARTIN

Mailing Address 888 17TH STREET, NW
SUITE 1000

City State Zip Code
WASHINGTON DC 20006-3302

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DEER RIVER GROUP, LLC CONSULTANT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942976

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. RUBEN E. MARTINEZ

Mailing Address 623 NEW LAREDO HWY

City State Zip Code
SAN ANTONIO TX 78211-1929

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TORTILLERIA LA GRANDE INC. GENERAL MANAGER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928477

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
T. MARTINDALE

Mailing Address 1434 PUNAHOU ST.
APT 424

City State Zip Code
HONOLULU HI 96822-4713

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13947801

Amount of Each Receipt this Period

400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1414 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
WILLIAM MARTIN

Mailing Address 905 E ESPERANZA AVE

City State Zip Code
MCALLEN TX 78501-1424

FEC ID number of contributing federal political committee. **C**

Name of Employer UPPER VALLEY INTERVENTION-AL RADIOLOGY
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	6	/	2	0	1	0

Transaction ID: SA11.13969317

Amount of Each Receipt this Period
300.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CARROLL MARTRIN

Mailing Address 45 PRESTWICK

City State Zip Code
ODESSA TX 79762-5200

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	1	0

Transaction ID: SA11.13972030

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. VINCENT L. MARVIN

Mailing Address 73997 326 AVE

City State Zip Code
IMPERIAL NE 69033-3048

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	1	0

Transaction ID: SA11.13941932

Amount of Each Receipt this Period
110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **510.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1415 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
NANCY K. MASAI

Mailing Address 2421 SANTA CRUZ CT

City State Zip Code
TORRANCE CA 90501-4309

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951316

Amount of Each Receipt this Period
110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. WILLIAM MASH

Mailing Address 646 E MOORE ST

City State Zip Code
NORRISTOWN PA 19401-5141

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
STATE OF PA PRISON SUPERVISOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13947816

Amount of Each Receipt this Period
125.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. CHARLOTTE E. MASICA

Mailing Address 21 BALSAM LN N

City State Zip Code
PLYMOUTH MN 55441-6001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918667

Amount of Each Receipt this Period
75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **310.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1416 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. BEN L. MASON	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 4440 GUINEVERE LN.	Transaction ID: SA11.13943766
	City State Zip Code MEMPHIS TN 38135-6134	Amount of Each Receipt this Period 51.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 491.00	

B.	Full Name (Last, First, Middle Initial) DR. DAVID E. MASON	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 3352 OCEAN DR.	Transaction ID: SA11.13931793
	City State Zip Code CRP CHRISTI TX 78411-1457	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer MASON ENTERPRISES	Occupation SELF-EMPLOYED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 653.00	

C.	Full Name (Last, First, Middle Initial) GAIL MASON	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address P.O. BOX 557	Transaction ID: SA11.13939896
	City State Zip Code NAPLES ME 04055-0557	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	501.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1417 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. HELEN M. MASON

Mailing Address 9629 LANGDON AVE

City NORTH HILLS State CA Zip Code 91343-2104

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 755.00

Date of Receipt: 10 / 14 / 2010
Transaction ID: SA11.13930631
 Amount of Each Receipt this Period: 40.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. HELEN M. MASON

Mailing Address 9629 LANGDON AVE

City NORTH HILLS State CA Zip Code 91343-2104

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 755.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13935043
 Amount of Each Receipt this Period: 40.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. HELEN M. MASON

Mailing Address 9629 LANGDON AVE

City NORTH HILLS State CA Zip Code 91343-2104

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 755.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13946915
 Amount of Each Receipt this Period: 30.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 110.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1418 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. HELEN M. MASON
Mailing Address 9629 LANGDON AVE
City NORTH HILLS State CA Zip Code 91343-2104
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 755.00
Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13950285
Amount of Each Receipt this Period 60.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MARK MASON
Mailing Address 114 CIRCLE DR
City UNIVERSAL CITY State TX Zip Code 78148-4205
FEC ID number of contributing federal political committee. **C**
Name of Employer CITY OF UNIVERSAL CITY, TEXAS Occupation POLICE OFFICER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00
Date of Receipt 10 / 21 / 2010
Transaction ID: SA11.13945295
Amount of Each Receipt this Period 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. ALYNE Q. MASSEY
Mailing Address 4431 TYNE BLVD.
City NASHVILLE State TN Zip Code 37215-4537
FEC ID number of contributing federal political committee. **C**
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation PRIVATE INVESTOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 10 / 25 / 2010
Transaction ID: SA11.13948169
Amount of Each Receipt this Period 100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 260.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1419 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ALBERT J. MASTERSON

Mailing Address 4624 MCILROY DR

City State Zip Code
SAINT LOUIS MO 63128-3918

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
265.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938544

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. MICHAEL PAUL MATEY

Mailing Address 425 KREWSON TERRACE

City State Zip Code
WILLOW GROVE PA 19090-3615

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1021.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13945182

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. MICHAEL PAUL MATEY

Mailing Address 425 KREWSON TERRACE

City State Zip Code
WILLOW GROVE PA 19090-3615

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1021.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951664

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

210.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1420 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. HARRY S. MATHESON

Mailing Address 325 3RD ST N

City BRECKENRIDGE State MN Zip Code 56520-1410

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 10 / 19 / 2010

Transaction ID: SA11.13941818

Amount of Each Receipt this Period: 75.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MARILYN HYDE MATHEUS

Mailing Address 1123 W KINGS LN.

City YUMA State AZ Zip Code 85365-4333

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 218.00

Date of Receipt: 10 / 21 / 2010

Transaction ID: SA11.13945869

Amount of Each Receipt this Period: 60.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PRESTON MATHEWS

Mailing Address PO BOX F

City FAIRFIELD State IL Zip Code 62837-0149

FEC ID number of contributing federal political committee. **C**

Name of Employer WAYNE COTTY PRESS Occupation PUBLISHING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt: 10 / 18 / 2010

Transaction ID: SA11.13928849

Amount of Each Receipt this Period: 110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 245.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1421 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT G. MATHENY

Mailing Address 4370 RIVER BOTTOM DR

City NORCROSS State GA Zip Code 30092-1360

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13931694
Amount of Each Receipt this Period: 110.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. KAREN MATHISON

Mailing Address 5154 REDWILLOW LN

City LA CANADA State CA Zip Code 91011-2760

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation MARKETING DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13951466
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ALEXANDER MATINA

Mailing Address 500 WEST 56TH ST.

City NEW YORK State NY Zip Code 10019-3509

FEC ID number of contributing federal political committee. **C**

Name of Employer MFP INVESTORS, LLC Occupation FINANCE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 364.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13932302
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 310.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1422 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. ALEXANDER MATINA	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 500 WEST 56TH ST.	Transaction ID: SA11.13955927
	City State Zip Code NEW YORK NY 10019-3509	Amount of Each Receipt this Period 39.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation MFP INVESTORS, LLC FINANCE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 364.00	

B.	Full Name (Last, First, Middle Initial) MR. WALFRED MATSON	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 20339 FRIESLAND RD	Transaction ID: SA11.13955216
	City State Zip Code HINCKLEY MN 55037-3782	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 213.00	

C.	Full Name (Last, First, Middle Initial) GERALD T. MATTHEWS	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 210 VALLEY VW	Transaction ID: SA11.13932514
	City State Zip Code POMPTON PLAINS NJ 07444-2165	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	

SUBTOTAL of Receipts This Page (optional)	99.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1423 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
GERALD T. MATTHEWS

Mailing Address 210 VALLEY VW

City State Zip Code
POMPTON PLAINS NJ 07444-2165

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 21 / 2010

Transaction ID: SA11.13946488

Amount of Each Receipt this Period

10.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
GERALD T. MATTHEWS

Mailing Address 210 VALLEY VW

City State Zip Code
POMPTON PLAINS NJ 07444-2165

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 22 / 2010

Transaction ID: SA11.13949309

Amount of Each Receipt this Period

20.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ROY H. MATTHEWS

Mailing Address 103 CAPILANO LN

City State Zip Code
BROUSSARD LA 70518-6110

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 19 / 2010

Transaction ID: SA11.13931805

Amount of Each Receipt this Period

75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

105.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1424 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. SHAWN MATTHEWS

Mailing Address 110 EAST 59TH ST.
4TH FLOOR

City State Zip Code
NEW YORK NY 10022-1336

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CANTOR FITZGERALD & CO. CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959410

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. SHAWN MATTHEWS

Mailing Address 110 EAST 59TH ST.
4TH FLOOR

City State Zip Code
NEW YORK NY 10022-1336

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CANTOR FITZGERALD & CO. CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959413

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MISS TRUDIE M. MATTHEWS

Mailing Address 2437 BETHEL RD

City State Zip Code
STARKVILLE MS 39759-9654

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928020

Amount of Each Receipt this Period
110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **10110.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1425 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. PATRICIA LEE MATTISON	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 7406 HEINZ PLACE	Transaction ID: SA11.13957107
	City State Zip Code LYNNWOOD WA 98036-5824	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

B.	Full Name (Last, First, Middle Initial) ROGER MATTINGLY	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 6518 CALAIS CIR.	Transaction ID: SA11.13939655
	City State Zip Code INDIANAPOLIS IN 46220-5000	Amount of Each Receipt this Period 35.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

C.	Full Name (Last, First, Middle Initial) ROGER MATTINGLY	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 6518 CALAIS CIR.	Transaction ID: SA11.13941125
	City State Zip Code INDIANAPOLIS IN 46220-5000	Amount of Each Receipt this Period 35.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

SUBTOTAL of Receipts This Page (optional)	▶	90.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1426 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
TRACY S. MATTOS

Mailing Address 110 BAYOU PEREZ DR

City State Zip Code
MADISONVILLE LA 70447-9799

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
OWNER EQUASTRIAN CENTER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 640.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918713

Amount of Each Receipt this Period
510.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. HAROLD MATZNER

Mailing Address 555 NORTH PATENCIO

City State Zip Code
PALM SPRINGS CA 92262-4353

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CBA INDUSTRIES, INC. INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961226

Amount of Each Receipt this Period
10400.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GARY C. MAUCH

Mailing Address 20801 S SPRINGWATER RD

City State Zip Code
ESTACADA OR 97023-8604

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949083

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 10960.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1427 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GARY C. MAUCH

Mailing Address 20801 S SPRINGWATER RD

City State Zip Code
ESTACADA OR 97023-8604

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	2	/	2	0	1	0

Transaction ID: SA11.13962698

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MICHAEL P. MAUDSLEY

Mailing Address 390 LOCH LOMOND RD

City State Zip Code
RANCHO MIRAGE CA 92270-5606

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED
Occupation INSURANCE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	1	0

Transaction ID: SA11.13970064

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DEREK MAURER

Mailing Address 6190 LITTLE VALLEY WAY

City State Zip Code
ALEXANDRIA VA 22310-1543

FEC ID number of contributing federal political committee. **C**

Name of Employer MACAULAY-BROWN, INC.
Occupation CONTRACTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	5	/	2	0	1	0

Transaction ID: SA11.13928427

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **650.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1428 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. HAROLD E. MAURER

Mailing Address 300 N RIDGE RD. UNIT 34

City State Zip Code
HENRICO VA 23229-7453

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 341.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13963653

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MARGUERITE K. MAURER

Mailing Address 438 LINDMAN DR.

City State Zip Code
CHAMBERSBURG PA 17202-7500

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 446.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13940770

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HILL MAURY

Mailing Address 143 KENTUCKY AVE

City State Zip Code
LEXINGTON KY 40502-1754

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED STOCK BROKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13936740

Amount of Each Receipt this Period
1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 126.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1429 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. HENRY H. MAUZ, JR.

Mailing Address 1608 VISCAINO RD.

City State Zip Code
PEBBLE BEACH CA 93953-3303

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 201.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952310

Amount of Each Receipt this Period

101.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. DENNIS MAVES

Mailing Address 9374 AVIANO DR., #102

City State Zip Code
FORT MYERS FL 33913-8289

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943553

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. CLINTON L. MAXIM

Mailing Address 11876 HOLLYHOCK DR

City State Zip Code
LAKEWOOD RANCH FL 34202-2041

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13960879

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

226.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1430 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ADDISON K. MAY

Mailing Address 306 SAINT JAMES PARK

City State Zip Code
NASHVILLE TN 37215-2447

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
MM / DD / YYYY
11 / 22 / 2010

Transaction ID: SA11.13973015

Amount of Each Receipt this Period
110.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. ALICE T. MAY

Mailing Address 38 PLATT AVE

City State Zip Code
SAUSALITO CA 94965-1896

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13931653

Amount of Each Receipt this Period
30.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. DENNIS L. MAY

Mailing Address 11 SHEFFIELD CT.

City State Zip Code
VICTOR NY 14564-8980

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13949827

Amount of Each Receipt this Period
80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **220.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1431 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DR. JOSEPH E. MAY

Mailing Address 3 LIGHT HOUSE POINT RD.

City State Zip Code
HUNTINGTON NY 11743-1010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932515

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. CAROL MAYER

Mailing Address 4438 N MURRAY AVE

City State Zip Code
MILWAUKEE WI 53211-1643

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ST JOSEPH'S HOSPITAL NURSE

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929403

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. CAROL MAYER

Mailing Address 4438 N MURRAY AVE

City State Zip Code
MILWAUKEE WI 53211-1643

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ST JOSEPH'S HOSPITAL NURSE

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 5 / 2 0 1 0

Transaction ID: SA11.13966352

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

140.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1432 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. CARL M. MAYER

Mailing Address 4670 CARLTON DUNES DR UNIT 7

City State Zip Code
FERNANDINA FL 32034-5589

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943333

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. DOUGLAS L. MAYER

Mailing Address 272 S 325 E

City State Zip Code
WARSAW IN 46582-7264

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 212.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933027

Amount of Each Receipt this Period

22.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. DOUGLAS L. MAYER

Mailing Address 272 S 325 E

City State Zip Code
WARSAW IN 46582-7264

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 212.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940230

Amount of Each Receipt this Period

40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

162.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1433 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. JULIA A. MAYER

Mailing Address 1506 N WOODLAWN AVE

City State Zip Code
SAINT LOUIS MO 63122-1448

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928024

Amount of Each Receipt this Period

40.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ROBERT USHER MAYFIELD

Mailing Address 11309 PICKFAIR DR

City State Zip Code
AUSTIN TX 78750-2527

FEC ID number of contributing federal political committee. **C**

Name of Employer
SELF-EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
DR.

Aggregate Year-to-Date ▼
610.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934661

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. JUNE J. MAYO

Mailing Address 20 SE 103RD AVE APT 512

City State Zip Code
PORTLAND OR 97216-2873

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
RETIRED

Aggregate Year-to-Date ▼
870.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954805

Amount of Each Receipt this Period

10.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1434 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. JUNE J. MAYO

Mailing Address 20 SE 103RD AVE APT 512

City State Zip Code
PORTLAND OR 97216-2873

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 870.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2010

Transaction ID: SA11.13956302

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
ALEX MAZO

Mailing Address 2538 MERIDIAN AVE

City State Zip Code
SAN JOSE CA 95124-1745

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
MM / DD / YYYY
11 / 09 / 2010

Transaction ID: SA11.13967543

Amount of Each Receipt this Period
60.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DR. MITCHELL J. MAZUREK

Mailing Address 1320 CANTIGNY COURT
APARTMENT 97

City State Zip Code
CHESTERTON IN 46304

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13949599

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **760.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1435 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. CARMELA MAZZITELLI
Mailing Address 171 ALBANY BLVD

City State Zip Code
ATLANTIC BEACH NY 11509-1202

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CONSTRUCTION CO. OWNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 480.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942577

Amount of Each Receipt this Period
120.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. FRANCIS J. MC DONALD
Mailing Address 601 W. 17 RD

City State Zip Code
PHILLIPS NE 68865-4101

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED FARMER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 1 0

Transaction ID: SA11.13966830

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. FRANCES M. MC DONALD
Mailing Address 757 4TH AVE S

City State Zip Code
CLINTON IA 52732-4621

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 265.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952848

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

210.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1436 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GRAHAM B. MC DONALD

Mailing Address 203 CASTLEWAY STREET

City State Zip Code
VICTORIA TX 77904-1744

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952710

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. KEN MC DONALD

Mailing Address 261 W TROY ST.

City State Zip Code
SAINT PARIS OH 43072-9212

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GREEN CAMP BAPTIST CHURCH PASTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13965264

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. LYDIA MC DONALD

Mailing Address 917 E MAIN ST.

City State Zip Code
WARSAW IN 46580-3442

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943241

Amount of Each Receipt this Period
80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 230.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1437 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. LYDIA MC DONALD		Date of Receipt
	Mailing Address 917 E MAIN ST.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 6 / 2 0 1 0
	City	State	Zip Code
	WARSAW	IN	46580-3442
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: SA11.13956335
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 80.00
		<input type="text"/> 300.00	CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MARTIN MC DONALD		Date of Receipt
	Mailing Address 3606 DOROTHY LN		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 1 / 0 4 / 2 0 1 0
	City	State	Zip Code
	FORT WORTH	TX	76107-1702
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: SA11.13965688
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00
		<input type="text"/> 250.00	CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MRS. PEGGY MC DONALD		Date of Receipt
	Mailing Address 1110 E BAKERVIEW RD		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 1 / 2 0 1 0
	City	State	Zip Code
	BELLINGHAM	WA	98226-9144
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: SA11.13947570
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 75.00
		<input type="text"/> 300.00	CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 405.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1438 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. STAN MC DONALD

Mailing Address 4851 WHITESBURG DR SE

City State Zip Code
HUNTSVILLE AL 35802-1626

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MCDONALD & ASSOC LAWYER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Transaction ID: SA11.13967811

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. RONALD O. MCAFEE

Mailing Address 1612 SARATOGA WAY

City State Zip Code
EDMOND OK 73003-3550

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939765

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ELIZABETH MCAFOOSE

Mailing Address 11512 HENEGAN PL

City State Zip Code
SPOTSYLVANIA VA 22551-4655

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963768

Amount of Each Receipt this Period

75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

525.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1439 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. BARBARA S. MCALEER

Mailing Address 100 WINEBERRY DR

City State Zip Code
WINCHESTER VA 22603-4251

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 221.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930230

Amount of Each Receipt this Period
51.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. GLENN H. MCALEXANDER

Mailing Address 800 REPUBLICAN CHURCH RD.

City State Zip Code
FERRUM VA 24088-2700

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 202.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936707

Amount of Each Receipt this Period
2.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. RALPH MCALISTER

Mailing Address 17580 RANDALLS FERRY ROAD

City State Zip Code
NORWOOD NC 28128-7461

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949305

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

103.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1440 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. ZOLA E. MCALLISTER

Mailing Address 101 LARKSPUR DR

City State Zip Code
HUNTINGTON WV 25705-3903

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 401.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935933

Amount of Each Receipt this Period

1.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. NOVELLA MCARTHY

Mailing Address 5892 LOS AMIGOS ST.

City State Zip Code
BUENA PARK CA 90620-2713

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 581.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946961

Amount of Each Receipt this Period

30.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. NOVELLA MCARTHY

Mailing Address 5892 LOS AMIGOS ST.

City State Zip Code
BUENA PARK CA 90620-2713

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 581.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946963

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

81.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1441 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. PAULINE M. MCARTHUR

Mailing Address 579 N SUPERIOR AVE

City State Zip Code
DECATUR GA 30033-5401

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1330.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955835

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOE MCBRIDE

Mailing Address 6202 SHOAL CREEK DR. W

City State Zip Code
AUSTIN TX 78757-4315

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MYLINDES RET SPTG GOUDS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 208.75

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948337

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DANIEL MCCABE

Mailing Address 239 WEST TRAIL

City State Zip Code
STAMFORD CT 06903-2407

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931809

Amount of Each Receipt this Period
80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 605.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1442 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. LINDA MCCALLISTER

Mailing Address 315 E MALLOW RD

City State Zip Code
COVINGTON VA 24426-2414

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 19 / 2010

Transaction ID: SA11.13931673

Amount of Each Receipt this Period
75.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. ANNA JENNIFER MCCANN

Mailing Address 8 AGAWAM AVE

City State Zip Code
OLD SAYBROOK CT 06475-3102

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED
Occupation COMMERCIAL RE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2010

Transaction ID: SA11.13959755

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. BILL MCCANCE

Mailing Address 11160 N DESERT VIEW LN

City State Zip Code
FLAGSTAFF AZ 86004-1790

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
910.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 22 / 2010

Transaction ID: SA11.13950476

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **225.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1443 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOHN MCCANDLESS

Mailing Address 58 W RIVER DR

City State Zip Code
BEAUFORT SC 29907-1133

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13971278

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. KERRY MCCAN

Mailing Address P.O. BOX 146

City State Zip Code
VICTORIA TX 77902-0146

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED RANCHER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 681.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940679

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CHARLES E. MCCARTNEY, JR.

Mailing Address 3316 CRAWLEY ROAD

City State Zip Code
SHELBY NC 28150-9569

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13951964

Amount of Each Receipt this Period
51.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **351.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1444 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
E H. MCCARTER

Mailing Address 3237 WOLSTENHOLME DR

City State Zip Code
MEMPHIS TN 38133-4157

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13947116

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. JUDY H. MCCARTY

Mailing Address 8151 HEMINGWAY AVE

City State Zip Code
SAN DIEGO CA 92120-1717

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940711

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. PAUL MCCARTHY

Mailing Address 10210 SE 239TH. ST. APT. 15
APT 15

City State Zip Code
KENT WA 98031-3379

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935777

Amount of Each Receipt this Period

95.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

305.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1445 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. DAVID MCCHESENEY

Mailing Address PO BOX 1340

City State Zip Code
TOMBALL TX 77377-1340

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13958237

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. MARJORIE J. MCCHESENEY

Mailing Address 27070 KINDLEWOOD LANE

City State Zip Code
BONITA SPRINGS FL 34134-4369

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13969278

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ELMER W. MCCLAVE, JR.

Mailing Address P.O. BOX 352

City State Zip Code
UHRICHSVILLE OH 44683-0352

FEC ID number of contributing federal political committee. **C**

Name of Employer SUPERIOR CLAY CORP Occupation V PRES

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 375.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954753

Amount of Each Receipt this Period
225.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **2925.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1446 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. LILLIAN R. MCCLEARY

Mailing Address 17450 BLUE JAY DR

City State Zip Code
MORGAN HILL CA 95037-6405

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 1 0

Transaction ID: SA11.13928702

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. RITA MCCLEES

Mailing Address 33 IVY CHASE NE

City State Zip Code
ATLANTA GA 30342-4500

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955098

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DOROTHY P. MCCLURE

Mailing Address 5363 N CASCABEL RD

City State Zip Code
BENSON AZ 85602-8316

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936633

Amount of Each Receipt this Period
1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 201.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1447 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. EDDIE DALE MCCLURE		Date of Receipt MM / DD / YYYY 10 / 19 / 2010		
	Mailing Address 5368 KENNESAW DR		Transaction ID: SA11.13931929		
	City BATON ROUGE	State LA	Zip Code 70817-2555	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
	Name of Employer GLASSES UNLIMITED INC	Occupation BUSINESS OWNER	Aggregate Year-to-Date 205.00		

B.	Full Name (Last, First, Middle Initial) MR. MICHAEL E. MCCLURKEN		Date of Receipt MM / DD / YYYY 11 / 22 / 2010		
	Mailing Address 26 DEER MEADOW RD		Transaction ID: SA11.13971584		
	City DURHAM	State NH	Zip Code 03824-3400	Amount of Each Receipt this Period 210.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	Aggregate Year-to-Date 210.00		

C.	Full Name (Last, First, Middle Initial) MR. THOMAS MCCLURE		Date of Receipt MM / DD / YYYY 10 / 19 / 2010		
	Mailing Address 1120 WINNIE WAY		Transaction ID: SA11.13931549		
	City LATROBE	State PA	Zip Code 15650-9080	Amount of Each Receipt this Period 200.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
	Name of Employer RETIRED	Occupation RETIRED	Aggregate Year-to-Date 300.00		

SUBTOTAL of Receipts This Page (optional)	510.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1448 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
JUDITH MCCOLLUM

Mailing Address 1829 PARKVIEW CT NW

City State Zip Code
KENNESAW GA 30152-4775

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 239.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932590

Amount of Each Receipt this Period
114.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JOHN N. MCCONNELL

Mailing Address 815 SAINT ANNES LN.

City State Zip Code
VERO BEACH FL 32967-7349

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 405.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941117

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JOHN N. MCCONNELL

Mailing Address 815 SAINT ANNES LN.

City State Zip Code
VERO BEACH FL 32967-7349

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 405.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949244

Amount of Each Receipt this Period
60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

214.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1449 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

BARB MCCORMICK

Mailing Address 8012 CHRIS CT

City State Zip Code
GRANITE BAY CA 95746-9589

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13964513

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

TERETHA A. MCCORMICK

Mailing Address 4595 CLIPPER BAY RD

City State Zip Code
DULUTH GA 30096-6211

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938702

Amount of Each Receipt this Period

35.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. KENNETH W. MCCOY

Mailing Address 6 SPRINGLEIGH DR

City State Zip Code
STAUNTON VA 24401-5741

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943530

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

335.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1450 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) RICHARD B. MCCOY	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 1 0
	Mailing Address 4108 S. TENFEL LANE	Transaction ID: SA11.13943021
	City State Zip Code SPOKANE WA 99223-6174	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.00	

B.	Full Name (Last, First, Middle Initial) MARK MCCREARY	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 1 0
	Mailing Address 18244 ARCHES CT.	Transaction ID: SA11.13960701
	City State Zip Code FOUNTAIN VLY CA 92708-6802	Amount of Each Receipt this Period 55.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation XXXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXX	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	

C.	Full Name (Last, First, Middle Initial) MR. RICHARD E. MCCREADY	Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Mailing Address 100 WORTH AVE PH 10	Transaction ID: SA11.13964736
	City State Zip Code PALM BEACH FL 33480-4717	Amount of Each Receipt this Period 101.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	

SUBTOTAL of Receipts This Page (optional)	▶	256.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1451 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. SHELBY MCCRIMMON

Mailing Address 201 GELSEMIUM PL

City State Zip Code
GREENVILLE SC 29615-5458

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935241

Amount of Each Receipt this Period

75.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. TODD S. MCCUAIG

Mailing Address 30 HASTINGS LN

City State Zip Code
CHAGRIN FALLS OH 44022-3246

FEC ID number of contributing federal political committee. **C**

Name of Employer
SELF-EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
INVESTOR

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951503

Amount of Each Receipt this Period

210.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. CECIL K. MCCULLOUGH

Mailing Address 1641 CHERRY CREEK DR

City State Zip Code
WOODWAY TX 76712-2201

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951576

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

485.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1452 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) JAMES MCCULLEY		Date of Receipt
	Mailing Address 4308 CLOVERDALE EST.		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	NORTHPORT	AL	35473-1848
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13957211
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="260.00"/>	<input type="text" value="60.00"/>
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) JAMES D. MCCULLEY		Date of Receipt
	Mailing Address 935 WOODWINDS DR.		<input type="text" value="11"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	COOKEVILLE	TN	38501-4082
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13966589
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="276.00"/>	<input type="text" value="76.00"/>
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MR. BARRON P. MCCUNE, JR.		Date of Receipt
	Mailing Address 90 W CHESTNUT ST STE 100		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	WASHINGTON	PA	15301-4524
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13936877
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	<input type="text" value="500.00"/>
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="636.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1453 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
HELEN MCCUNE

Mailing Address 4920 N JEFFERSON ST. APT. 3

City PULASKI State NY Zip Code 13142-4128

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 405.00

Date of Receipt 10 / 19 / 2010

Transaction ID: SA11.13939283

Amount of Each Receipt this Period 50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
HELEN MCCUNE

Mailing Address 4920 N JEFFERSON ST. APT. 3

City PULASKI State NY Zip Code 13142-4128

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 405.00

Date of Receipt 11 / 22 / 2010

Transaction ID: SA11.13972947

Amount of Each Receipt this Period 50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
TIMOTHY MCCUNE

Mailing Address 2304 N. ROOSEVELT STREET

City ARLINGTON State VA Zip Code 22205-1936

FEC ID number of contributing federal political committee. **C**

Name of Employer INTEGRATED WAVE TECHNOLOGIES, INC. Occupation EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 16 / 2010

Transaction ID: SA11.13928707

Amount of Each Receipt this Period 500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 600.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1454 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. ANNE MCDONNELL	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 3376 COLLINS CREEK DR	Transaction ID: SA11.13947778
	City State Zip Code MURRELLS INLET SC 29576-7000	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

B.	Full Name (Last, First, Middle Initial) MR. CHARLES C. MCDONALD	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 263 PEA RIDGE ARENA RD.	Transaction ID: SA11.13964430
	City State Zip Code DUBACH LA 71235-3340	Amount of Each Receipt this Period 110.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation BELL SOUTH TELE-COMMUNICA-TION FACILITY TECHNICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

C.	Full Name (Last, First, Middle Initial) MR. RICHARD H. MCDONNELL	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 7626 CALLAGHAN ROAD APT 406	Transaction ID: SA11.13954475
	City State Zip Code SAN ANTONIO TX 78229-2700	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

SUBTOTAL of Receipts This Page (optional)	▶	235.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1455 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CHAD T. MCDUGALL

Mailing Address 14909 LAURIN LANE

City State Zip Code
OKLAHOMA CITY OK 73142-1913

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JMA ENERGY COMPANY, LLC VICE PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
10 / 20 / 2010

Transaction ID: SA11.13945245

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JEFFREY J. MCDUGALL

Mailing Address 1021 NW GRAND BOULEVARD

City State Zip Code
OKLAHOMA CITY OK 73118-6039

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JMA ENERGY COMPANY PRESIDENT/OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
10 / 20 / 2010

Transaction ID: SA11.13945246

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. PAMELA L. MCDOWELL

Mailing Address 400 N PARKE ST.

City State Zip Code
TUSCOLA IL 61953-1259

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TUSCOLA STONE COMPANY QC/QA MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13933946

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **7540.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1456 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT W. MCDOWELL

Mailing Address 1009 CHESTNUT STREET

City State Zip Code
HALSTEAD KS 67056-2316

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MCDOWELL ELECTRIC ELECTRICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13969332

Amount of Each Receipt this Period
75.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. KENNETH W. MCDUFFIE

Mailing Address 105 WEST DEL MONTE AVENUE

City State Zip Code
CLEWISTON FL 33440-5201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13942500

Amount of Each Receipt this Period
1500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. JUDY MCELFRESH

Mailing Address 3461 RAMSTAD DR.

City State Zip Code
SAN JOSE CA 95127-4322

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13965105

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1600.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1457 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
JAMES MCELHANEY

Mailing Address **3411 CAMBRIDGE RD**

City **DURHAM** State **NC** Zip Code **27707-4507**

FEC ID number of contributing federal political committee. **C**

Name of Employer **DUKE UNIVERSITY** Occupation **PROFESSOR EMERITUS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **10 / 16 / 2010**

Transaction ID: SA11.13928706

Amount of Each Receipt this Period **500.00**

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JOHN O. MCELHANEY

Mailing Address **30578 MIDDLE CREEK CIR**

City **DAPHNE** State **AL** Zip Code **36527-5686**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **10 / 22 / 2010**

Transaction ID: SA11.13948985

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ARTHUR H. MCELROY, II

Mailing Address **1964 EAST 45 PLACE**

City **TULSA** State **OK** Zip Code **74105-4217**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MCELROY MFG. INC.** Occupation **EXECUTIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2500.00**

Date of Receipt **10 / 21 / 2010**

Transaction ID: SA11.13942980

Amount of Each Receipt this Period **2500.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **3100.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1458 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. CHARLES MCELWEE	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 102 JACKSON STREET	Transaction ID: SA11.13918612
	City State Zip Code LOUISVILLE MS 39339-9287	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer STATE OF MISSISSIPPI	Occupation RIGHT OF WAY AGENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

B.	Full Name (Last, First, Middle Initial) CARTER H. MCENTIRE	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 435 N KINGS GRANT DR	Transaction ID: SA11.13955950
	City State Zip Code COLUMBIA SC 29209-0840	Amount of Each Receipt this Period -250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer MCENTIRE PRODUCE	Occupation OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	CHARGED BACK

C.	Full Name (Last, First, Middle Initial) MR. DAVID L. MCFARLAND	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 8191 130TH AVE SE	Transaction ID: SA11.13949969
	City State Zip Code GWINNER ND 58040-9772	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional)	-100.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1459 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DAVID L. MCFARLAND

Mailing Address 8191 130TH AVE SE

City State Zip Code
GWINNER ND 58040-9772

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 1 0

Transaction ID: SA11.13966865

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. GOROG C. MCFARLAND

Mailing Address 100 GRAYS LANE

City State Zip Code
HAVERFORD PA 19041

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 251.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13964739

Amount of Each Receipt this Period
51.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL N. MCGAUGH

Mailing Address 6100 CHANDLER DR.

City State Zip Code
BATON ROUGE LA 70808-5018

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AB&B ENGINEERS OWNER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962613

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 251.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1460 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) SARAH MCGAUGHY	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 401 EAST ST, NE	Transaction ID: SA11.13955773
	City State Zip Code VIENNA VA 22180-3577	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) MS. JANET D. MCGEE	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 18607 E HIERRO CIR	Transaction ID: SA11.13931624
	City State Zip Code RIO VERDE AZ 85263-5096	Amount of Each Receipt this Period 210.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 530.00	

C.	Full Name (Last, First, Middle Initial) CAROL MCGHEE	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 600 ELLIOTT DR.	Transaction ID: SA11.13960085
	City State Zip Code PASADENA CA 91106-4431	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	▶	1310.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1461 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. EDMOND P. MCGINTY

Mailing Address 179 SOMERSET ROSE LN

City State Zip Code
SUGAR HILL GA 30518-7713

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
MANAGEMENT

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943137

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DR. EDWARD T. MCGONIGAL

Mailing Address 601 N 30TH ST

City State Zip Code
OMAHA NE 68131-2137

FEC ID number of contributing federal political committee. **C**

Name of Employer
CREIGHTON UNIVERSITY

Occupation
PHYSICIAN ANESTHESIOLOGIST

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961666

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JOSEPH P. MCGOVERN

Mailing Address 5074 CARDUCCI DR.

City State Zip Code
PLEASANTON CA 94588-6011

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939231

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1462 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOSEPH P. MCGOVERN

Mailing Address 5074 CARDUCCI DR.

City PLEASANTON State CA Zip Code 94588-6011

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13956167
 Amount of Each Receipt this Period: 200.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. HAROLD E. MCGOWEN

Mailing Address 3657 WOODS BLVD

City TYLER State TX Zip Code 75707-1663

FEC ID number of contributing federal political committee. **C**

Name of Employer NAVIDAD RESOURCES, LLC Occupation ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 11 / 01 / 2010
Transaction ID: SA11.13962477
 Amount of Each Receipt this Period: 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. TOMMIE MCGOWIN

Mailing Address 1306 N ALABAMA

City OKMULGEE State OK Zip Code 74447-7019

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 546.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13944092
 Amount of Each Receipt this Period: 100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 400.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1463 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. TOMMIE MCGOWIN

Mailing Address 1306 N ALABAMA

City State Zip Code
OKMULGEE OK 74447-7019

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 546.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946562

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. TOMMIE MCGOWIN

Mailing Address 1306 N ALABAMA

City State Zip Code
OKMULGEE OK 74447-7019

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 546.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956432

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. TOMMIE MCGOWIN

Mailing Address 1306 N ALABAMA

City State Zip Code
OKMULGEE OK 74447-7019

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 546.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956995

Amount of Each Receipt this Period

35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

185.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1464 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. TOMMIE MCGOWIN

Mailing Address 1306 N ALABAMA

City State Zip Code
OKMULGEE OK 74447-7019

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 546.00

Date of Receipt: 11 / 22 / 2010
Transaction ID: SA11.13972847
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHN D. MCGREW

Mailing Address 503 LAWTON RD.

City State Zip Code
MARIETTA OH 45750-1121

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 11 / 02 / 2010
Transaction ID: SA11.13962522
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GEORGE MCGUIRE, JR.

Mailing Address 540 HIGH POINT LN. NE

City State Zip Code
ATLANTA GA 30342-2753

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13949283
Amount of Each Receipt this Period: 60.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 210.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1465 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. JOHN DUNCAN MCINTYRE

Mailing Address 333 LEE DR. APT. G16

City State Zip Code
BATON ROUGE LA 70808-4986

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
STANOCOLA MEDICAL CLINIC PHYSICIAN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 501.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934291

Amount of Each Receipt this Period
101.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LOGAN R. MCINTYRE

Mailing Address 701 OAKHURST DR.

City State Zip Code
BASTROP LA 71220-5245

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EAGLES NEST FARM CO. FARMER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 221.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963556

Amount of Each Receipt this Period
101.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. YVONNE O. MCIRAVY

Mailing Address 505 RICHARD AVENUE

City State Zip Code
LANSING MI 48917-2749

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 316.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13931089

Amount of Each Receipt this Period
36.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 238.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1466 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. YVONNE O. MCIRAVY

Mailing Address 505 RICHARD AVENUE

City State Zip Code
LANSING MI 48917-2749

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
316.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 10 / 2010

Transaction ID: SA11.13967618

Amount of Each Receipt this Period

35.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ALBAN T. MCISAAC

Mailing Address 6800 FLEETWOOD RD. APT. 1104

City State Zip Code
MC LEAN VA 22101-3610

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
655.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 19 / 2010

Transaction ID: SA11.13932301

Amount of Each Receipt this Period

40.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ALBAN T. MCISAAC

Mailing Address 6800 FLEETWOOD RD. APT. 1104

City State Zip Code
MC LEAN VA 22101-3610

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
655.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 21 / 2010

Transaction ID: SA11.13942952

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

100.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1467 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ALBAN T. MCISAAC

Mailing Address 6800 FLEETWOOD RD. APT. 1104

City State Zip Code
MC LEAN VA 22101-3610

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 655.00

Date of Receipt
MM / DD / YYYY
10 / 27 / 2010

Transaction ID: SA11.13955925

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN MCKEAN

Mailing Address 12844 STATE HIGHWAY 198

City State Zip Code
MABANK TX 75156-5427

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TEXAS HYDROSPORTS PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13963672

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CHRIS MCKEE

Mailing Address 9529 GLYNDOWNING DRIVE

City State Zip Code
COLLEGE DALE TN 37363

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MCKEE FOODS SALES AND MARKETING EXEC

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2010

Transaction ID: SA11.13962848

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **5075.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1468 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JACK MCKEE

Mailing Address 9530 GLYNN DOWNING DRIVE

City State Zip Code
OOLTEWAH TN 37363-8141

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA11.13932339
Amount of Each Receipt this Period: 15000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RUSSELL MCKEE

Mailing Address P.O. BOX 1144

City State Zip Code
COLLEGEDALE TN 37315-1144

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MCKEE FOODS CORPORATION EVP MANUFACTURING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 11 / 01 / 2010
Transaction ID: SA11.13961216
Amount of Each Receipt this Period: 5000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HERBERT L. MCKELVEY

Mailing Address 5407 EPPING LN.

City State Zip Code
ZEPHYRHILLS FL 33541-2613

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13944684
Amount of Each Receipt this Period: 250.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 20250.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1469 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. MIREILLE G. MCKELL		Date of Receipt
	Mailing Address 166 W SECOND ST		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 10 / 19 / 2010
	City	State	Zip Code
	CHILLICOTHE	OH	45601-3112
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13931656
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 55.00
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MR. BARBARA M. MCKENZIE		Date of Receipt
	Mailing Address 705 NORGATE ROAD		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 10 / 15 / 2010
	City	State	Zip Code
	KNOXVILLE	TN	37919-7015
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13931355
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 25.00
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MR. BARBARA M. MCKENZIE		Date of Receipt
	Mailing Address 705 NORGATE ROAD		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 10 / 29 / 2010
	City	State	Zip Code
	KNOXVILLE	TN	37919-7015
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13962201
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 25.00
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 105.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1470 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DAVID M. MCKENNEY

Mailing Address 5026 GREENPINE DR NE

City ATLANTA State GA Zip Code 30342-2402

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13944126
Amount of Each Receipt this Period: 1.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
HUBERT G. MCKENNA

Mailing Address 51 READ RD.

City RED HOOK State NY Zip Code 12571-2226

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 10 / 28 / 2010
Transaction ID: SA11.13959447
Amount of Each Receipt this Period: 85.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. NANCY L. MCKENZIE

Mailing Address 4775 PITTSBURG RD

City OWOSSO State MI Zip Code 48867-9252

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13943447
Amount of Each Receipt this Period: 30.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 116.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1471 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. NANCY L. MCKENZIE

Mailing Address 4775 PITTSBURG RD

City State Zip Code
OWOSSO MI 48867-9252

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 295.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13969481

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
RONALD MCKENNA

Mailing Address 5770 HARBORAGE DR

City State Zip Code
FT MYERS FL 33908-4548

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945648

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JAMES J. MCKEON

Mailing Address 350 POND LN.

City State Zip Code
HEWLETT NY 11557

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13960171

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3025.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1472 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MRS. LYDIA MCKIBBEN</p> <p>Mailing Address 2630 HEMINGWAY DRIVE</p> <p>City State Zip Code ARLINGTON TX 76006-3203</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation HOMEMAKER HOMEMAKER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 340.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 14 / 2010</p> <p>Transaction ID: SA11.13930305</p> <p>Amount of Each Receipt this Period 200.00</p> <p>CONTRIBUTION</p>
---	--

<p>B. Full Name (Last, First, Middle Initial) MRS. ELLEN R. MCKINNON</p> <p>Mailing Address 234 27TH AVE S</p> <p>City State Zip Code GRAND FORKS ND 58201-7536</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 351.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 19 / 2010</p> <p>Transaction ID: SA11.13941610</p> <p>Amount of Each Receipt this Period 101.00</p> <p>CONTRIBUTION</p>
--	--

<p>C. Full Name (Last, First, Middle Initial) MR. CHARLES MCKISSICK</p> <p>Mailing Address 4107 FAIRWAY DOWNS CT</p> <p>City State Zip Code CHARLOTTE NC 28277-8603</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation INSTRALIGHT EXECUTIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 360.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 28 / 2010</p> <p>Transaction ID: SA11.13957967</p> <p>Amount of Each Receipt this Period 250.00</p> <p>CONTRIBUTION</p>
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SUBTOTAL of Receipts This Page (optional)	551.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1473 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. WILLIAM R. MCKISSICK		Date of Receipt
	Mailing Address 2414 CARAVEL LN		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	KNOXVILLE	TN	37922-6174
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13942537
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 100.00
		<input type="text"/> 250.00	CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MR. ANDREW G. MCKITTRICK		Date of Receipt
	Mailing Address 676 TRIUNFO CANYON RD		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	WESTLAKE VILLAGE	CA	91361-2055
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13957730
Name of Employer SELF-EMPLOYED		Occupation ADVERTISING AND MARKETING	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 105.00
		<input type="text"/> 365.00	CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MRS. JAMES H. MCKNIGHT		Date of Receipt
	Mailing Address 11909 MILLWRIGHT PKWY.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	AUSTIN	TX	78750-1614
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13956218
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 200.00
		<input type="text"/> 300.00	CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 405.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1474 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ELBERT MCLAIN

Mailing Address 2034 ATLAS PEAK RD

City State Zip Code
NAPA CA 94558-1208

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928835

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. JOSEPHINE H. MCLAIN

Mailing Address 936 VIA LIDO NORD

City State Zip Code
NEWPORT BEACH CA 92663-5527

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938568

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN MCLAREN

Mailing Address 9 COUNTRY CLUB LN

City State Zip Code
SHENANDOAH IA 51601-2702

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957563

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 225.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1475 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. LILLIAN MCLEAN

Mailing Address 4400 MCHUGH RD APT 402

City State Zip Code
ZACHARY LA 70791-5326

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
430.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	1	0

Transaction ID: SA11.13972326

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. DIANE MCLELLAN

Mailing Address 9829 ANDREWS AVE

City State Zip Code
ALLEN PARK MI 48101-1295

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED
Occupation DENTIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
211.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	1	0

Transaction ID: SA11.13949773

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. BOBBIE C. MCLEOD

Mailing Address 1237 WEDGEWOOD DR

City State Zip Code
WINSTON SALEM NC 27103-4211

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
307.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	1	0

Transaction ID: SA11.13946796

Amount of Each Receipt this Period
51.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **141.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1476 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MARSHA MCLEOD		Date of Receipt
	Mailing Address 2918 GOLDEN TRAILS ST.		<input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	ONTARIO	CA	91761-9122
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer CVUSD		Occupation TRACKER	Transaction ID: SA11.13929942
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="266.00"/>	<input type="text" value="1.00"/>
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) MARSHA MCLEOD		Date of Receipt
	Mailing Address 2918 GOLDEN TRAILS ST.		<input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	ONTARIO	CA	91761-9122
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer CVUSD		Occupation TRACKER	Transaction ID: SA11.13930686
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="266.00"/>	<input type="text" value="25.00"/>
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) MARSHA MCLEOD		Date of Receipt
	Mailing Address 2918 GOLDEN TRAILS ST.		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	ONTARIO	CA	91761-9122
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer CVUSD		Occupation TRACKER	Transaction ID: SA11.13937028
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="266.00"/>	<input type="text" value="40.00"/>
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="66.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1477 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. DAN MCMAHON		Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 9413 KADER COURT		Transaction ID: SA11.13931822
	City PLATTSMOUTH	State NE	Zip Code 68048-4760
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 105.00
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 560.00	CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MR. JOSEPH D. MCMAHAN, JR.		Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 2804 MIDSUMMER DRIVE		Transaction ID: SA11.13930027
	City WINDERMERE	State FL	Zip Code 34786-8321
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.00
	Name of Employer RETIRED		Occupation RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 223.00	CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) ROSA MCMANUS-SPRAGUE		Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 3649 APPOMATOX DR		Transaction ID: SA11.13941950
	City AMELIA	State OH	Zip Code 45102-1660
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00	CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	▶	180.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1478 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. ALVIN E. MCMILLAN	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 15592 N. MISTY LANE	Transaction ID: SA11.13936593
	City State Zip Code EFFINGHAM IL 62401-7720	Amount of Each Receipt this Period 1.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 201.00	

B.	Full Name (Last, First, Middle Initial) MR. ALVIN E. MCMILLAN	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 15592 N. MISTY LANE	Transaction ID: SA11.13939358
	City State Zip Code EFFINGHAM IL 62401-7720	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 201.00	

C.	Full Name (Last, First, Middle Initial) MS. GRACE M. MCMILLAN	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 178 BECKY LN	Transaction ID: SA11.13947836
	City State Zip Code MOUNT AIRY NC 27030-7780	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 285.00	

SUBTOTAL of Receipts This Page (optional)	76.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1479 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) J W. MCMILLEN	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address BOX 134 MEADOW BRIDGE	Transaction ID: SA11.13954979
	City State Zip Code MEADOW BRIDGE WV 25976	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) MICHAEL D. MCMILLAN	Date of Receipt MM / DD / YYYY 11 / 18 / 2010
	Mailing Address 15321 COUNTY FARM RD	Transaction ID: SA11.13969689
	City State Zip Code GULFPORT MS 39503-8220	Amount of Each Receipt this Period 55.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer HARRISON COUNTY	Occupation PARK DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	

C.	Full Name (Last, First, Middle Initial) K MCMULLEN	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 6561 STORM CAT LN	Transaction ID: SA11.13931230
	City State Zip Code BURLESON TX 76028-7955	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional)	255.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1480 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. IAN F. MCMURCHIE

Mailing Address 2425 SAGE ROAD

City State Zip Code
HOUSTON TX 77056-5000

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CHEVRON ENGINEER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951530

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
LYNELLE MCNALLY

Mailing Address 843 S RACINE

City State Zip Code
MESA AZ 85206-2845

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 586.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940727

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
LYNELLE MCNALLY

Mailing Address 843 S RACINE

City State Zip Code
MESA AZ 85206-2845

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 586.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948827

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1481 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DONALD R. MCNATTY

Mailing Address 24352 PARKSIDE DR E

City State Zip Code
LAGUNA NIGUEL CA 92677-1719

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
D.R. MCNATTY & ASSOC., IN-CONSULTANT
C.

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929750

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
H. D. MCNEE

Mailing Address P.O. BOX 2028

City State Zip Code
SUN VALLEY ID 83353-2028

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER INFORMATION REQUESTED PER BEST EFFORTS
BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13962923

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BRIAN MCNEILL

Mailing Address 4065 SOUTH FOUR MILE RUN DRIVE

City State Zip Code
ARLINGTON VA 22204-5608

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EDELMAN SENIOR VICE PRESIDENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13957614

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 750.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1482 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. THOMAS L. MCNERNEY

Mailing Address 9115 OAK VALLEY RD

City State Zip Code
HOLLAND OH 43528-9217

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928985

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. GLADYS P. MCNIGHT

Mailing Address 178 COUNTY ROAD 4491

City State Zip Code
CLARKSVILLE AR 72830-6369

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 222.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13969378

Amount of Each Receipt this Period

20.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. JOANNA MCPARTLIN

Mailing Address 5250 HORIZON DR

City State Zip Code
MALIBU CA 90265-3736

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 305.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938500

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

170.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1483 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
BETTY MCPHEETERS

Mailing Address 23998 S MCPHEETERS RD.

City State Zip Code
GOTHENBURG NE 69138-9351

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961310

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOSEPH W. MCRAE

Mailing Address 105 GROUSE RD.

City State Zip Code
SUMMERVILLE SC 29485-5106

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
626.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933183

Amount of Each Receipt this Period
201.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CARMEN MCREYNOLDS

Mailing Address 4576 KILARNEY CIR.

City State Zip Code
SANTA ROSA CA 95403-0109

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2400.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13964822

Amount of Each Receipt this Period
400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **801.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1484 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
CARMEN MCREYNOLDS
Mailing Address 4576 KILARNEY CIR.
City SANTA ROSA State CA Zip Code 95403-0109
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2400.00
Date of Receipt 11 / 16 / 2010
Transaction ID: SA11.13969208
Amount of Each Receipt this Period 1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WALLACE W. MCTAGGART
Mailing Address 320 E STATE RD. 100
City SAN MATEO State FL Zip Code 32187-2361
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 204.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13934449
Amount of Each Receipt this Period 3.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES MCVANEY
Mailing Address 1521 N GREENBRIER ST
City ARLINGTON State VA Zip Code 22205-3625
FEC ID number of contributing federal political committee. **C**
Name of Employer RENTECH INC Occupation GOVERNMENT AFFAIRS
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 575.00
Date of Receipt 10 / 20 / 2010
Transaction ID: SA11.13938552
Amount of Each Receipt this Period 250.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1253.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1485 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. REBECCA A. MCVEY

Mailing Address 3 HONEYSUCKLE LN

City State Zip Code
COVINGTON LA 70433-4425

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 03 / 2010

Transaction ID: SA11.13965318

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
EDWIN MEADE, JR.

Mailing Address 1500 WESTBROOK CT. APT. 3144

City State Zip Code
RICHMOND VA 23227-3373

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 21 / 2010

Transaction ID: SA11.13946380

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MARILYN R. MEADOWS

Mailing Address 10077 212TH RD

City State Zip Code
WINFIELD KS 67156-7202

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 18 / 2010

Transaction ID: SA11.13938359

Amount of Each Receipt this Period
20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **170.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1486 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MARK MEANOR

Mailing Address 16398 HAWLEY RD.

City State Zip Code
OBERLIN OH 44074-9507

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931888

Amount of Each Receipt this Period
160.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SUZANNE E. MEARS

Mailing Address 2624 21ST. ST. NW

City State Zip Code
CANTON OH 44708-2579

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
251.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932933

Amount of Each Receipt this Period
51.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. HENRY C. MEEKER

Mailing Address 4800 WILFORD WAY

City State Zip Code
EDINA MN 55435-1563

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957189

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **261.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1487 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. SUE B. MEEKINS

Mailing Address 3800 LINDA LANE

City ANNANDALE State VA Zip Code 22003-1512

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13944779
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. FAYE MEEKS

Mailing Address 541 GLAZE CREEK RD

City BESSEMER State AL Zip Code 35023-7263

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13932132
Amount of Each Receipt this Period: 35.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DWAIN MEES

Mailing Address 830 WOODHAVEN LN

City GARLAND State TX Zip Code 75040-3617

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED
Occupation C.P.A.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt: 11 / 03 / 2010
Transaction ID: SA11.13964457
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **135.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1488 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
ANN B. MEGOWN

Mailing Address P.O. BOX 424

City State Zip Code
PINE BLUFFS WY 82082-0424

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13942048

Amount of Each Receipt this Period
45.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
CATHERINE MEHLER

Mailing Address 18548 CUTLASS DR.

City State Zip Code
FT MYERS BCH FL 33931-2305

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
10 / 20 / 2010

Transaction ID: SA11.13943327

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. ANEASE MEIER

Mailing Address 4217 RIVER BND.

City State Zip Code
SAN ANGELO TX 76903-8024

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MEIER BUSINESS SYSTEMS, INC. OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 451.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13929032

Amount of Each Receipt this Period
75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **220.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1489 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. ANEASE MEIER	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 4217 RIVER BND.	Transaction ID: SA11.13933095
	City State Zip Code SAN ANGELO TX 76903-8024	Amount of Each Receipt this Period 101.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer MEIER BUSINESS SYSTEMS, INC.	Occupation OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 451.00	

B.	Full Name (Last, First, Middle Initial) MRS. ANEASE MEIER	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 4217 RIVER BND.	Transaction ID: SA11.13949096
	City State Zip Code SAN ANGELO TX 76903-8024	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer MEIER BUSINESS SYSTEMS, INC.	Occupation OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 451.00	

C.	Full Name (Last, First, Middle Initial) WILLIAM MEIER, III	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 5838 JOYCE WAY	Transaction ID: SA11.13958553
	City State Zip Code DALLAS TX 75225-1623	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	326.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1490 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES MEINKE

Mailing Address 2147 N WEST TORCH LAKE DR

City State Zip Code
KEWADIN MI 49648-9064

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
10 / 19 / 2010

Transaction ID: SA11.13931875

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAVID L. MEISELMAN

Mailing Address 2346 CENTREVILLE RD.

City State Zip Code
HERNDON VA 20171-3016

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
10 / 18 / 2010

Transaction ID: SA11.13928984

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOHN W. MEISEL

Mailing Address 665 SICKLE ST

City State Zip Code
PLATTEVILLE WI 53818-1769

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt
10 / 19 / 2010

Transaction ID: SA11.13932170

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **240.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1491 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JOHN W. MEISEL

Mailing Address 665 SICKLE ST

City State Zip Code
PLATTEVILLE WI 53818-1769

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13962109

Amount of Each Receipt this Period
20.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHN W. MEISEL

Mailing Address 665 SICKLE ST

City State Zip Code
PLATTEVILLE WI 53818-1769

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13969558

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BARBARA J. MEISSENBURG

Mailing Address 3631 N NEARGLEN AVE

City State Zip Code
COVINA CA 91724-3422

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 206.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930839

Amount of Each Receipt this Period
1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 61.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1492 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. MANUEL MEJIA

Mailing Address 302 WALNUT COURT WAY

City State Zip Code
KENNETT SQUARE PA 19348-3388

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 447.00

Date of Receipt M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946752

Amount of Each Receipt this Period 26.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. MANUEL MEJIA

Mailing Address 302 WALNUT COURT WAY

City State Zip Code
KENNETT SQUARE PA 19348-3388

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 447.00

Date of Receipt M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958580

Amount of Each Receipt this Period 25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. MANUEL MEJIA

Mailing Address 302 WALNUT COURT WAY

City State Zip Code
KENNETT SQUARE PA 19348-3388

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 447.00

Date of Receipt M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958927

Amount of Each Receipt this Period 25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 76.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1493 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. MANUEL MEJIA

Mailing Address 302 WALNUT COURT WAY

City State Zip Code
KENNETT SQUARE PA 19348-3388

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 447.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Transaction ID: SA11.13968447

Amount of Each Receipt this Period
20.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. CURTIS L. MELBERG

Mailing Address 8956 HUNTERS CIR

City State Zip Code
WOODBURY MN 55125-9184

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 226.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958968

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. EDWARD MELENDEZ

Mailing Address 8800 SOMERSET BLVD

City State Zip Code
PARAMOUNT CA 90723-4659

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EHAFM ENG MGR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 490.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931938

Amount of Each Receipt this Period
230.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

275.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1494 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. ENERIO MELIS		Date of Receipt
	Mailing Address 1108 SKYTOP CIR		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	CHARLESTON	WV	25314-2222
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer SELF-EMPLOYED		Occupation REAL ESTATE	Transaction ID: SA11.13948177
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>	<input type="text" value="1000.00"/>
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) MR. PETER MELLEY		Date of Receipt
	Mailing Address 48458 264TH ST		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	VALLEY SPRINGS	SD	57068-7313
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer SSAI		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13956734
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1135.00"/>	<input type="text" value="25.00"/>
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) MR. MERLE M. MELTON		Date of Receipt
	Mailing Address 2668 170TH. ST.		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	SIDNEY	IA	51652-4021
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer SELF-EMPLOYED		Occupation FARMER	Transaction ID: SA11.13941000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="306.00"/>	<input type="text" value="40.00"/>
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1065.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1495 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. MARY L. MELTZER

Mailing Address 14 EDGECOMB RD

City State Zip Code
BINGHAMTON NY 13905-4017

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1157.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13965256

Amount of Each Receipt this Period

700.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ROGER C. MELZER

Mailing Address 156 PROSPECT PARK W APT. 1L

City State Zip Code
BROOKLYN NY 11215-4550

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EQUITABLE MANAGMNT CORP REAL ESTATE MANAGEMENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 440.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941440

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ROGER C. MELZER

Mailing Address 156 PROSPECT PARK W APT. 1L

City State Zip Code
BROOKLYN NY 11215-4550

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EQUITABLE MANAGMNT CORP REAL ESTATE MANAGEMENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 440.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13972872

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1496 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) FATHER JOSEPH MENDES	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 113 GLOSTER ROAD NW	Transaction ID: SA11.13958654
	City State Zip Code LAWRENCEVILLE GA 30044-4470	Amount of Each Receipt this Period 145.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation PAROCHIAL VICAR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 767.00	

B.	Full Name (Last, First, Middle Initial) FATHER JOSEPH MENDES	Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address 113 GLOSTER RD. NW	Transaction ID: SA11.13963393
	City State Zip Code LAWRENCEVILLE GA 30044-4470	Amount of Each Receipt this Period 2.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation PAROCHIAL VICAR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 767.00	

C.	Full Name (Last, First, Middle Initial) FATHER JOSEPH MENDES	Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address 113 GLOSTER RD. NW	Transaction ID: SA11.13964056
	City State Zip Code LAWRENCEVILLE GA 30044-4470	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation PAROCHIAL VICAR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 767.00	

SUBTOTAL of Receipts This Page (optional)	▶	197.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1497 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MARK MENEZES		Date of Receipt
	Mailing Address 4630 HOLBORN AVENUE		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	ANNANDALE	VA	22003-4554
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer HUNTON & WILLIAMS LLP		Occupation ATTORNEY	Transaction ID: SA11.13957905
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>	<input type="text" value="1000.00"/>
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) MR. LARRY B. MENKE		Date of Receipt
	Mailing Address 107 LAKEVIEW RD		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	WEST POINT	IA	52656-9506
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13955906
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="440.00"/>	<input type="text" value="160.00"/>
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) KAREN MENNICK		Date of Receipt
	Mailing Address P.O. BOX 809		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	HOMEWOOD	CA	96141-0809
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13941605
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="201.00"/>	<input type="text" value="101.00"/>
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1261.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1498 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. R MERCER

Mailing Address 11 BERKSHIRE

City State Zip Code
TRABUCO CANYON CA 92679-3415

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 19 / 2010

Transaction ID: SA11.13972103

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ARTHUR LORRAINE MERCK

Mailing Address 1804 5TH. AVE NW APT. 211
APARTMENT 211

City State Zip Code
WAVERLY IA 50677-1940

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 18 / 2010

Transaction ID: SA11.13935349

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ARTHUR LORRAINE MERCK

Mailing Address 1804 5TH. AVE NW APT. 211
APARTMENT 211

City State Zip Code
WAVERLY IA 50677-1940

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 01 / 2010

Transaction ID: SA11.13963365

Amount of Each Receipt this Period
1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **151.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1499 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. NELDA F. MERCK	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 1350 SHRUB OAK DR	Transaction ID: SA11.13957694
	City State Zip Code LEAGUE CITY TX 77573-5272	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

B.	Full Name (Last, First, Middle Initial) MR. DALE MERKEL	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 17202 DAVENPORT ST	Transaction ID: SA11.13933236
	City State Zip Code OMAHA NE 68118-4076	Amount of Each Receipt this Period 101.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SCHEELS ALL SPORTS	Occupation PARTNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00	

C.	Full Name (Last, First, Middle Initial) MR. WILLIAM K. MERKEL	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 129 LOS CEDROS LOOP	Transaction ID: SA11.13943695
	City State Zip Code KERRVILLE TX 78028-2910	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.00	

SUBTOTAL of Receipts This Page (optional)	▶	301.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1500 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. WILLIAM K. MERKEL	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 129 LOS CEDROS LOOP	Transaction ID: SA11.13943739
	City State Zip Code KERRVILLE TX 78028-2910	Amount of Each Receipt this Period 1.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.00	

B.	Full Name (Last, First, Middle Initial) MR. JACK M. MERRITTS	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 470 CODY DR	Transaction ID: SA11.13952889
	City State Zip Code DENVER CO 80226-1146	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

C.	Full Name (Last, First, Middle Initial) TOMMIE MERRIMAN	Date of Receipt MM / DD / YYYY 11 / 04 / 2010
	Mailing Address 1210 SUNSET DR	Transaction ID: SA11.13965894
	City State Zip Code WILMINGTON IL 60481-1547	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 316.00	

SUBTOTAL of Receipts This Page (optional)	131.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1501 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DANIEL R. MERRY

Mailing Address 850 BLUEGRASS DR. W

City State Zip Code
BILLINGS MT 59106-4522

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MERRY CELLANS OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13963588

Amount of Each Receipt this Period
101.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PAUL MERSHON

Mailing Address 1631 LOMA ST

City State Zip Code
SANTA BARBARA CA 93103-2021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
10 / 28 / 2010

Transaction ID: SA11.13960014

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GEORGE MERZ

Mailing Address 15484 INCAPA RD.

City State Zip Code
JULIAN CA 92036-9508

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13929011

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **701.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1502 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ANN J. MESSINEO	Date of Receipt MM / DD / YYYY 11 / 19 / 2010
	Mailing Address 15 JACQUELINE CT	Transaction ID: SA11.13971094
	City State Zip Code LANOKA HARBOR NJ 08734-2229	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00	

B.	Full Name (Last, First, Middle Initial) DOROTHY M. MESSLER	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 997 N MARKET ST. APT. 4	Transaction ID: SA11.13955618
	City State Zip Code TROY OH 45373-1465	Amount of Each Receipt this Period 80.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation FIRST TROY CORP REAL ESTATE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) MR. GEORGE METCALF	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 8430 ABBINGTON CIR APT C34	Transaction ID: SA11.13955272
	City State Zip Code NAPLES FL 34108-7763	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

SUBTOTAL of Receipts This Page (optional)	▶	215.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1503 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. MARY E. METCALF		Date of Receipt
	Mailing Address 27136 BURBANK		<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	FOOTHILL RNCH	CA	92610-2503
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13945387
Name of Employer SELF-EMPLOYED		Occupation SALES	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	<input type="text" value="100.00"/>
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MRS. YVONNE H. METHOT		Date of Receipt
	Mailing Address 2303 WARREN STREET		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	BELLEVUE	NE	68005-5226
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13957247
Name of Employer PILGRIM LUTH. CHURCH		Occupation SECRETARY	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="231.00"/>	<input type="text" value="1.00"/>
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MRS. YVONNE H. METHOT		Date of Receipt
	Mailing Address 2303 WARREN STREET		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	BELLEVUE	NE	68005-5226
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13957572
Name of Employer PILGRIM LUTH. CHURCH		Occupation SECRETARY	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="231.00"/>	<input type="text" value="55.00"/>
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="156.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1504 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DR. MARK METTAUER	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 14 NORTH SEASON TRACE	Transaction ID: SA11.13958249
	City State Zip Code THE WOODLANDS TX	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

B.	Full Name (Last, First, Middle Initial) JEFFREY C. METZEL	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 19391 SHADY HARBOR	Transaction ID: SA11.13959676
	City State Zip Code HUNTINGTON BEACH CA 92648-2136	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.00	

C.	Full Name (Last, First, Middle Initial) JONATHAN METZLER	Date of Receipt MM / DD / YYYY 11 / 04 / 2010
	Mailing Address 3806 TRAUS ST	Transaction ID: SA11.13965560
	City State Zip Code DALLAS TX 75204	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	5700.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1505 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ALLAN MEYER

Mailing Address 2436 S 6TH AVE.

City RIVERSIDE State IL Zip Code 60546-1242

FEC ID number of contributing federal political committee. **C**

Name of Employer SALT CREEK ASSOICATES Occupation BUSINESS CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 414.00

Date of Receipt: 11 / 02 / 2010
Transaction ID: SA11.13962543
 Amount of Each Receipt this Period: 55.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CHARLES R. MEYERHOFF

Mailing Address 201 ARCH ST

City VEVAY State IN Zip Code 47043-1001

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13945521
 Amount of Each Receipt this Period: 25.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DANIEL P. MEYER

Mailing Address 2506 DUXBURY PLACE

City ALEXANDRIA State VA Zip Code 22308-2138

FEC ID number of contributing federal political committee. **C**

Name of Employer THE DUBERSTEIN GROUP Occupation VICE PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13948196
 Amount of Each Receipt this Period: 5000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 5080.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1506 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
HOWARD MEYER, JR.

Mailing Address 4745 SHADOW WOODS CT.

City State Zip Code
DUMFRIES VA 22025-1067

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954070

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JOHN R. MEYER

Mailing Address 1118 PINSONFORK DRIVE

City State Zip Code
SPRING TX 77379-3617

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
RETIRED

Aggregate Year-to-Date ▼
390.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930675

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JOHN R. MEYER

Mailing Address 1118 PINSONFORK DRIVE

City State Zip Code
SPRING TX 77379-3617

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
RETIRED

Aggregate Year-to-Date ▼
390.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940437

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

300.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1507 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. JULIANNE P. MEYERHOLZ

Mailing Address 60 FOREST DR

City State Zip Code
SHORT HILLS NJ 07078-2833

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2010

Transaction ID: SA11.13962821

Amount of Each Receipt this Period
115.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. JULIANNE P. MEYERHOLZ

Mailing Address 60 FOREST DR

City State Zip Code
SHORT HILLS NJ 07078-2833

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
MM / DD / YYYY
11 / 22 / 2010

Transaction ID: SA11.13973183

Amount of Each Receipt this Period
115.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. LISA MEYER

Mailing Address 300 INDEPENDENCE AVE., SE

City State Zip Code
WASHINGTON DC 20003-1021

FEC ID number of contributing federal political committee. **C**

Name of Employer CORNERSTONE GOVERNMENT AFFAIRS Occupation GOVERNMENT AFFAIRS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
MM / DD / YYYY
10 / 29 / 2010

Transaction ID: SA11.13959402

Amount of Each Receipt this Period
150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 380.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1508 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. PHILIP K. MEYER

Mailing Address 327 HOLLOW TREE RIDGE ROAD

City State Zip Code
DARIEN CT 06820-3217

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation INVESTMENT MANAGEMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 7500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951346

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. PHILIP K. MEYER

Mailing Address 327 HOLLOW TREE RIDGE ROAD

City State Zip Code
DARIEN CT 06820-3217

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation INVESTMENT MANAGEMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 7500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959068

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
THOMAS MEYER

Mailing Address 3240 WILSON BLVD. # 120

City State Zip Code
ARLINGTON VA 22201-4429

FEC ID number of contributing federal political committee. **C**

Name of Employer CONDO 1, INC. Occupation REAL ESTATE BROKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930734

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **5500.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1509 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
THOMAS MEYER

Mailing Address 3240 WILSON BLVD. # 120

City ARLINGTON State VA Zip Code 22201-4429

FEC ID number of contributing federal political committee. **C**

Name of Employer CONDO 1, INC. Occupation REAL ESTATE BROKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13945565
Amount of Each Receipt this Period: 500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WENDY M. MEYERS

Mailing Address 39012 128TH STREET

City ABERDEEN State SD Zip Code 57401-8110

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13941768
Amount of Each Receipt this Period: 500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. LAWRENCE S. MIAO

Mailing Address 100 SPEAR STREET, #939

City SAN FRANCISCO State CA Zip Code 94105-1534

FEC ID number of contributing federal political committee. **C**

Name of Employer OLYMPUS CAPITAL Occupation PRIVATE EQUITY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 9600.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13942975
Amount of Each Receipt this Period: 9600.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 10600.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1510 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. DIANA D. MICHAEL

Mailing Address 18 WAGNER CT
APT C

City State Zip Code
WASHINGTON COURT H OH 43160-2079

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PROGRESSIVE CLEANING

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928307

Amount of Each Receipt this Period
90.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. SAM S. MIDDLETON

Mailing Address 1507 13TH STREET

City State Zip Code
LUBBOCK TX 79401-3919

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CHARLES S. MIDDLETON AND SONS OWNER

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918422

Amount of Each Receipt this Period
300.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL R. MIELKE

Mailing Address 2222 MINNESOTA ST

City State Zip Code
OSHKOSH WI 54902-7022

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
J & M ELECTRIC INC. CEO

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942597

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

490.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1511 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. THOMAS E. MIGNIN	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 402 BUCKEYE STREET	Transaction ID: SA11.13941617
	City ARCHBOLD State OH Zip Code 43502-1165	Amount of Each Receipt this Period 51.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 873.00	

B.	Full Name (Last, First, Middle Initial) MR. THOMAS E. MIGNIN	Date of Receipt MM / DD / YYYY 11 / 18 / 2010
	Mailing Address 402 BUCKEYE STREET	Transaction ID: SA11.13971321
	City ARCHBOLD State OH Zip Code 43502-1165	Amount of Each Receipt this Period 102.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 873.00	

C.	Full Name (Last, First, Middle Initial) ROBERT MILAR	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 3510 JAMESTOWN DR.	Transaction ID: SA11.13940137
	City ROCKFORD State IL Zip Code 61109-2262	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 415.00	

SUBTOTAL of Receipts This Page (optional)	193.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1512 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ROBERT MILAR

Mailing Address 3510 JAMESTOWN DR.

City State Zip Code
ROCKFORD IL 61109-2262

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
415.00

Date of Receipt
MM / DD / YYYY
11 / 03 / 2010

Transaction ID: SA11.13965298

Amount of Each Receipt this Period
35.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. VINCE MILAVEC

Mailing Address 58 MOLINA RD.

City State Zip Code
PERALTA NM 87042-8851

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED
Occupation REAL ESTATE BROKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2010

Transaction ID: SA11.13951571

Amount of Each Receipt this Period
150.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT H. MILBRATH

Mailing Address 5200 SW 25TH. BLVD. UNIT 3221

City State Zip Code
GAINESVILLE FL 32608-8923

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13962964

Amount of Each Receipt this Period
75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **260.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1513 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. BILLIE L. MILES

Mailing Address 113 EDELTON AVE.

City SEVERN State MD Zip Code 21144-3236

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 11 / 18 / 2010

Transaction ID: SA11.13971264

Amount of Each Receipt this Period 50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BILLIE L. MILES

Mailing Address 113 EDELTON AVE.

City SEVERN State MD Zip Code 21144-3236

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 11 / 18 / 2010

Transaction ID: SA11.13971272

Amount of Each Receipt this Period 50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. C. MILKIE

Mailing Address 1499 WEMBLEY RD.

City SAN MARINO State CA Zip Code 91108-1939

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 21 / 2010

Transaction ID: SA11.13945778

Amount of Each Receipt this Period 225.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **325.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1514 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. WILLIAM J. MILLARD

Mailing Address 6914 FARNABY COURT

City SPRING State TX Zip Code 77379-7677

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt: 10 / 27 / 2010
Transaction ID: SA11.13958645
 Amount of Each Receipt this Period: 50.00
CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. WILLIAM J. MILLARD

Mailing Address 6914 FARNABY COURT

City SPRING State TX Zip Code 77379-7677

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt: 10 / 29 / 2010
Transaction ID: SA11.13961952
 Amount of Each Receipt this Period: 40.00
CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ALAN MILLER

Mailing Address PO BOX 462263

City ESCONDIDO State CA Zip Code 92046-2263

FEC ID number of contributing federal political committee. **C**

Name of Employer MR. ALAN MILLER Occupation APPRAISER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13929010
 Amount of Each Receipt this Period: 100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 190.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1515 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
BEVERLY J. MILLER
Mailing Address 812 E SHERMAN ST.
City HUTCHINSON State KS Zip Code 67501-3055
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 310.00
Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13941959
Amount of Each Receipt this Period 10.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BEVERLY J. MILLER
Mailing Address 812 E SHERMAN ST.
City HUTCHINSON State KS Zip Code 67501-3055
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 310.00
Date of Receipt 10 / 25 / 2010
Transaction ID: SA11.13952261
Amount of Each Receipt this Period 20.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BRENDA MILLER
Mailing Address 110 PANTHER CV
City CANTON State MS Zip Code 39046-5363
FEC ID number of contributing federal political committee. **C**
Name of Employer STRYKER Occupation SALES REP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 280.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13929653
Amount of Each Receipt this Period 95.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 125.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1516 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CRAIG R. MILLER

Mailing Address 446 WHEAT BERRY DR

City State Zip Code
ERIE CO 80516-6826

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RTD BUS DRIVER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13938444

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAVID B. MILLER

Mailing Address 3811 TURTLE CREEK BLVD.

City State Zip Code
DALLAS TX 75219-4407

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ENCAP INVESTMENTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13948201

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. FRANK MILLER

Mailing Address 1281 FOUNTAIN LAKES DR

City State Zip Code
LAWRENCEVILLE GA 30043-4795

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13957741

Amount of Each Receipt this Period
60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1260.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1517 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. HARRIET B. MILLER

Mailing Address 38141 HIGHWAY 42

City State Zip Code
PRAIRIEVILLE LA 70769-4008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
11 / 05 / 2010

Transaction ID: SA11.13966270

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. HAROLD J. MILLER

Mailing Address 15770 PAUL VEGA MD DR STE 202

City State Zip Code
HAMMOND LA 70403-1475

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED M.D.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
11 / 22 / 2010

Transaction ID: SA11.13972779

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. HELEN F. MILLER

Mailing Address 39517 CEDARWOOD DR

City State Zip Code
MURRIETA CA 92563-5305

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 286.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2010

Transaction ID: SA11.13956156

Amount of Each Receipt this Period
15.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 165.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1518 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. HELEN F. MILLER	Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address 39517 CEDARWOOD DR	Transaction ID: SA11.13963475
	City State Zip Code MURRIETA CA 92563-5305	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 286.00	

B.	Full Name (Last, First, Middle Initial) MR. HERMAN L. MILLER	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 4001 GLACIER HILLS DR UNIT 348 UNIT 348	Transaction ID: SA11.13936083
	City State Zip Code ANN ARBOR MI 48105-3658	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

C.	Full Name (Last, First, Middle Initial) MR. HERMAN L. MILLER	Date of Receipt MM / DD / YYYY 11 / 19 / 2010
	Mailing Address 4001 GLACIER HILLS DR UNIT 348 UNIT 348	Transaction ID: SA11.13972006
	City State Zip Code ANN ARBOR MI 48105-3658	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional)	▶	105.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1519 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. JEAN SOMERS MILLER	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 10 MARION AVENUE	Transaction ID: SA11.13929891
	City State Zip Code ALBANY NY 12203-1814	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1300.00

B.	Full Name (Last, First, Middle Initial) JOSEPH G. MILLER	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 2617 KNOB HILL RD	Transaction ID: SA11.13944533
	City State Zip Code JOHNSBURG IL 60051-2545	Amount of Each Receipt this Period 70.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer Occupation RETIRED RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 480.00

C.	Full Name (Last, First, Middle Initial) JOSEPH G. MILLER	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 2617 KNOB HILL RD	Transaction ID: SA11.13950063
	City State Zip Code JOHNSBURG IL 60051-2545	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer Occupation RETIRED RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 480.00

SUBTOTAL of Receipts This Page (optional)	470.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1520 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. MARSHALL B. MILLER, JR.		Date of Receipt
	Mailing Address 319 LIMESTONE CREEK		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 2 / 2 0 1 0
	City	State	Zip Code
	SAN ANTONIO	TX	78232-3503
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer JACKSON WALKER LLP		Occupation PARTNER	Transaction ID: SA11.13951112
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 1000.00	<input type="text"/> 1000.00
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) MS. MARY S. MILLER		Date of Receipt
	Mailing Address 3540 W AVENUE J13		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 5 / 2 0 1 0
	City	State	Zip Code
	LANCASTER	CA	93536-6320
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer RETIRED		Occupation RETIRED	Transaction ID: SA11.13928113
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 285.00	<input type="text"/> 50.00
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) MS. MARGETT T. MILLETT		Date of Receipt
	Mailing Address 2933 LAC D OR AVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 9 / 2 0 1 0
	City	State	Zip Code
	BATON ROUGE	LA	70810-0324
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13940389
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 500.00	<input type="text"/> 200.00
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1250.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1521 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. MAXIE J. MILLER
Mailing Address 635 MILLER CIRCLE
City PELHAM State AL Zip Code 35124-3753
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00
Date of Receipt 10 / 27 / 2010
Transaction ID: SA11.13955943
Amount of Each Receipt this Period 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MICHAEL MILLER
Mailing Address 132 OVERSHORES E
City MADISON State CT Zip Code 06443-2842
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00
Date of Receipt 10 / 14 / 2010
Transaction ID: SA11.13918676
Amount of Each Receipt this Period 20.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL MILLER
Mailing Address 14401 REEDS ST
City OVERLAND PARK State KS Zip Code 66223-1229
FEC ID number of contributing federal political committee. **C**
Name of Employer EXECUTIVE PRODUCERS, LLC Occupation CONSULTANT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00
Date of Receipt 10 / 28 / 2010
Transaction ID: SA11.13958256
Amount of Each Receipt this Period 250.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 370.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1522 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. NANCY MILLER	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 1520 COUNTRY CLUB DR	Transaction ID: SA11.13938536
	City State Zip Code PASO ROBLES CA 93446-3405	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 635.00	

B.	Full Name (Last, First, Middle Initial) DR. NORMAN D. MILLER	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 2644 NW ESPLANADE	Transaction ID: SA11.13955169
	City State Zip Code SEATTLE WA 98117-2527	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) DR. NORMAN D. MILLER	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 2644 NW ESPLANADE	Transaction ID: SA11.13958973
	City State Zip Code SEATTLE WA 98117-2527	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)	▶	205.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1523 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
NYLENE J. MILLER

Mailing Address 57304 COUNTY ROAD 31

City State Zip Code
GOSHEN IN 46528-9193

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13937325
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NYLENE J. MILLER

Mailing Address 57304 COUNTY ROAD 31

City State Zip Code
GOSHEN IN 46528-9193

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13939953
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NYLENE J. MILLER

Mailing Address 57304 COUNTY ROAD 31

City State Zip Code
GOSHEN IN 46528-9193

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13940464
Amount of Each Receipt this Period: 20.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 100.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1524 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MR. RANDALL C. MILLER</p> <p>Mailing Address 207 BELMONT CT</p> <p>City State Zip Code MICHIGAN CITY IN 46360-7014</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 240.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 14 / 2010</p> <p>Transaction ID: SA11.13930988</p> <p>Amount of Each Receipt this Period 35.00</p> <p>CONTRIBUTION</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) RICHARD T. MILLER, USN (RET.)</p> <p>Mailing Address 7101 BAY FRONT DR. APT. 316</p> <p>City State Zip Code ANNAPOLIS MD 21403-3701</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 345.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 25 / 2010</p> <p>Transaction ID: SA11.13954071</p> <p>Amount of Each Receipt this Period 100.00</p> <p>CONTRIBUTION</p>
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<p>C. Full Name (Last, First, Middle Initial) MR. ROBERT MILLER</p> <p>Mailing Address 17 AZALEA DRIVE APT B.</p> <p>City State Zip Code ORANGE CITY FL 32763-1304</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 240.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 21 / 2010</p> <p>Transaction ID: SA11.13947608</p> <p>Amount of Each Receipt this Period 15.00</p> <p>CONTRIBUTION</p>
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SUBTOTAL of Receipts This Page (optional)	150.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1525 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT MILLER

Mailing Address 17 AZALEA DRIVE
APT B.

City ORANGE CITY State FL Zip Code 32763-1304

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13973245

Amount of Each Receipt this Period
15.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT E. MILLER, JR.

Mailing Address P.O. BOX 52

City LOST CITY State WV Zip Code 26810-0052

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 1 0

Transaction ID: SA11.13966263

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RONALD E. MILLER

Mailing Address 12433 US HIGHWAY 6

City GENESEO State IL Zip Code 61254-8505

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 281.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934306

Amount of Each Receipt this Period
101.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 216.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1526 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. THOMAS STANLEY MILLER

Mailing Address 3635 BEVERLY DR.

City State Zip Code
DALLAS TX 75205-2869

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954695

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILLIAM MILLER

Mailing Address 515 MADISON AVE FL 31

City State Zip Code
NEW YORK NY 10022-5418

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940005

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WILLIAM MILLER

Mailing Address 515 MADISON AVE FL 31

City State Zip Code
NEW YORK NY 10022-5418

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941400

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 450.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1527 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. CHERYL MILLMAN		Date of Receipt
	Mailing Address PO BOX 156		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	WINLOCK	WA	98596-0156
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13960733
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="255.00"/>	<input type="text" value="60.00"/>
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) MR. DAVID W. MILLS		Date of Receipt
	Mailing Address 16 BROADWAY N		<input type="text" value="11"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	WESTBROOK	CT	06498-1631
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer RETIRED		Occupation RETIRED	Transaction ID: SA11.13971256
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="380.00"/>	<input type="text" value="50.00"/>
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) MR. JERRY W. MILLS		Date of Receipt
	Mailing Address 5316 MONTROSE DR.		<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	DALLAS	TX	75209-5616
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer RETIRED		Occupation RETIRED	Transaction ID: SA11.13944102
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="300.00"/>	<input type="text" value="200.00"/>
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="310.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1528 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JIM MILLS

Mailing Address 3343 ALABAMA TRL

City State Zip Code
COUDERSPORT PA 16915-9418

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED M&M MECHANICAL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945517

Amount of Each Receipt this Period
80.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. SCOTT P. MILLS

Mailing Address 1743 233RD PL NE

City State Zip Code
SAMMAMISH WA 98074-4453

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
IBM PRODUCT MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13947792

Amount of Each Receipt this Period
85.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GEORGE S. MILNOR, II

Mailing Address 57 POND WAY

City State Zip Code
ALTON IL 62002-3226

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MILLERS FIRST INSURANCE COS. INSURANCE EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 395.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962574

Amount of Each Receipt this Period
75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **240.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1529 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JACK M. MIMS

Mailing Address 605 W 12TH ST

City State Zip Code
WESLACO TX 78596-7407

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	1	0

Transaction ID: SA11.13941071

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JACK M. MIMS

Mailing Address 605 W 12TH ST

City State Zip Code
WESLACO TX 78596-7407

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	1	0

Transaction ID: SA11.13945178

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ALLEN MINDLIN

Mailing Address 1640 SEPULVEDA BOULEVARD
SUITE 218

City State Zip Code
LOS ANGELES CA 90025-7535

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	1	0

Transaction ID: SA11.13945623

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **2850.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1530 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CHARLES MINGES	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address P.O. BOX 899	Transaction ID: SA11.13918502
	City State Zip Code NAPLES FL 34106-0899	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

B.	Full Name (Last, First, Middle Initial) RONALD MINGS	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 2735 KOKOPELLI DR.	Transaction ID: SA11.13933542
	City State Zip Code MARION IL 62959-5213	Amount of Each Receipt this Period 199.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SIAAC ALLEGERIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 299.00	

C.	Full Name (Last, First, Middle Initial) MR. RICHARD MINICUCCI	Date of Receipt MM / DD / YYYY 11 / 10 / 2010
	Mailing Address 401 9TH STREET, NW SUITE 900	Transaction ID: SA11.13968695
	City State Zip Code WASHINGTON DC 20004-2145	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation NIXON & PEABODY ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	649.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1531 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. MELVIN R. MINKO	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 10135 AZALEA DR	Transaction ID: SA11.13928840
	City State Zip Code CROWN POINT IN 46307-5352	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00

B.	Full Name (Last, First, Middle Initial) MR. ANTHONY D. MINNICK, JR.	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 5920 ROBIN CT COURT	Transaction ID: SA11.13939631
	City State Zip Code LINCOLN NE 68516	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00

C.	Full Name (Last, First, Middle Initial) MR. LUCIAN S. MINOR	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 585 S GREER ST.	Transaction ID: SA11.13953595
	City State Zip Code MEMPHIS TN 38111-3225	Amount of Each Receipt this Period 101.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 376.00

SUBTOTAL of Receipts This Page (optional)	211.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1532 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ANTHONY MIRAKIAN

Mailing Address 77 STANDISH RD.

City: WATERTOWN State: MA Zip Code: 02472-1235

FEC ID number of contributing federal political committee. **C**

Name of Employer: RETIRED Occupation: RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 456.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13942169
 Amount of Each Receipt this Period: 10.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ANTHONY MIRAKIAN

Mailing Address 77 STANDISH RD.

City: WATERTOWN State: MA Zip Code: 02472-1235

FEC ID number of contributing federal political committee. **C**

Name of Employer: RETIRED Occupation: RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 456.00

Date of Receipt: 10 / 28 / 2010
Transaction ID: SA11.13960516
 Amount of Each Receipt this Period: 10.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. SALLY R. MIRANDA

Mailing Address 124 SE RIO CASARANO

City: PORT SAINT LUCIE State: FL Zip Code: 34984-6618

FEC ID number of contributing federal political committee. **C**

Name of Employer: NEW YORK LIFE INSURANCE CO. Occupation: SALESMAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13933470
 Amount of Each Receipt this Period: 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **270.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1533 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. PEGGY V. MISER

Mailing Address 9807 MCMAHON CT

City Missouri City State TX Zip Code 77459-6397

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13937463
Amount of Each Receipt this Period: 150.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
REV. ROBERT MISKIMEN

Mailing Address 21 HIGHLAND PKWY.

City Bella Vista State AR Zip Code 72715-2376

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt: 11 / 19 / 2010
Transaction ID: SA11.13972172
Amount of Each Receipt this Period: 30.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. DORILA MISQUERO

Mailing Address 30 PARK AVE

City White Plains State NY Zip Code 10603-3529

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt: 10 / 14 / 2010
Transaction ID: SA11.13918486
Amount of Each Receipt this Period: 35.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 215.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1534 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. JEROME L. MISSEL	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 583 HARRIS AVE	Transaction ID: SA11.13951097
	City State Zip Code WOONSOCKET RI 02895-1872	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SELF-EMPLOYED CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) MR. JEROME L. MISSEL	Date of Receipt MM / DD / YYYY 10 / 31 / 2010
	Mailing Address 583 HARRIS AVE	Transaction ID: SA11.13960681
	City State Zip Code WOONSOCKET RI 02895-1872	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SELF-EMPLOYED CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) ALYSON MITCHELL	Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address 520 RUSSELL AVE	Transaction ID: SA11.13960709
	City State Zip Code WYCKOFF NJ 07481-1707	Amount of Each Receipt this Period 410.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 660.00	

SUBTOTAL of Receipts This Page (optional)	910.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1535 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
CONSTANCE MITCHELL

Mailing Address 190 ALMENDRAL AVE

City State Zip Code
MENLO PARK CA 94027-4056

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949943

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. ELLEN R. MITCHELL

Mailing Address 6325 WATERS EDGE LN.

City State Zip Code
KNOXVILLE TN 37919-9602

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940890

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HOLBROOK T. MITCHELL

Mailing Address 2170 HOFFMAN LN.

City State Zip Code
NAPA CA 94558-9786

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED FARMER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1650.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956469

Amount of Each Receipt this Period
900.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1425.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1536 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. HOLBROOK T. MITCHELL

Mailing Address 2170 HOFFMAN LN.

City NAPA State CA Zip Code 94558-9786

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1650.00

Date of Receipt: 11 / 22 / 2010
Transaction ID: SA11.13972774
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. LEE ROY MITCHELL

Mailing Address 12400 COIT ROAD SUITE 800

City DALLAS State TX Zip Code 75251-2067

FEC ID number of contributing federal political committee. **C**

Name of Employer CINEMARK USA, INC. Occupation CHAIRMAN OF THE BOARD/ DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA11.13932330
Amount of Each Receipt this Period: 10000.00
CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. LOIS M. MITCHELL

Mailing Address 1850 FOX BRIDGE COURT

City FALLBROOK State CA Zip Code 92028-8204

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 29 / 2010
Transaction ID: SA11.13959041
Amount of Each Receipt this Period: 110.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 10210.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1537 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial) MS. SUZANNE S. MITCHELL		Date of Receipt MM / DD / YYYY 10 / 15 / 2010
Mailing Address 3911 SCHOONER PT DR. APARTMENT 205		Transaction ID: SA11.13928670
City JUPITER	State FL	Zip Code 33477-2352
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer HOMEMAKER	Occupation HOMEMAKER	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

B.

Full Name (Last, First, Middle Initial) THOMAS MITCHELL		Date of Receipt MM / DD / YYYY 10 / 20 / 2010
Mailing Address 9516 BRIAR LANE		Transaction ID: SA11.13938810
City DELAPLANE	State VA	Zip Code 20144-1955
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer GEOBRIDGE CORPORATION	Occupation PRESIDENT	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.

Full Name (Last, First, Middle Initial) PRADIP K. MITRA		Date of Receipt MM / DD / YYYY 11 / 22 / 2010
Mailing Address 7646 ARDLEIGH ST.		Transaction ID: SA11.13972775
City PHILADELPHIA	State PA	Zip Code 19118-3202
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer MITRA & ASSOC INC	Occupation CONSULTING ENGINEER	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 680.00	

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1538 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DALE MIZELL

Mailing Address 4 PORTER ST

City State Zip Code
DUMAS AR 71639-2814

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	3	/	2	0	1	0

Transaction ID: SA11.13964402

Amount of Each Receipt this Period
210.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ANTHONY MLAKAR

Mailing Address 13445 CEDAR ACRES DR

City State Zip Code
CHESTERLAND OH 44026-3557

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	2	/	2	0	1	0

Transaction ID: SA11.13971644

Amount of Each Receipt this Period
30.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LESLIE ARNOLD MOE

Mailing Address 1721 CHARLESWOOD ESTATES DR

City State Zip Code
WEST FARGO ND 58078-4201

FEC ID number of contributing federal political committee. **C**

Name of Employer MONARDS INC
Occupation MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
430.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	8	/	2	0	1	0

Transaction ID: SA11.13966951

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **290.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1539 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JACK MOELLERING

Mailing Address 414 NW 4TH ST

City POCAHONTAS State IA Zip Code 50574-1002

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 282.00

Date of Receipt: 10 / 29 / 2010
Transaction ID: SA11.13961313
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. EGIL MOEN

Mailing Address PO BOX 308

City ORION State IL Zip Code 61273-0308

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 14 / 2010
Transaction ID: SA11.13918609
Amount of Each Receipt this Period: 60.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CHARLES R. MOESER, JR.

Mailing Address 870 CLASSIC CT. APT. 213

City NAPLES State FL Zip Code 34110-7051

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13939051
Amount of Each Receipt this Period: 101.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 261.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1540 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. DAVID THOMSON MOHLER

Mailing Address 3 W. IRVING STREET

City State Zip Code
CHEVY CHASE MD 20815-4218

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EAST END GROUP MANAGING PARTNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13951141

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JOHN MOHME

Mailing Address 8942 BURTON WAY

City State Zip Code
BEVERLY HILLS CA 90211-1631

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 715.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13971355

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JOHN MOHR

Mailing Address 33602 S HAMPSHIRE ST

City State Zip Code
LIVONIA MI 48154-2716

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944867

Amount of Each Receipt this Period

10.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5160.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1541 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CRAIG R. MOLES

Mailing Address 3127 HAMPTON ROAD

City PALMDALE State CA Zip Code 93551-1574

FEC ID number of contributing federal political committee. **C**

Name of Employer LOCKHEED MARTIN Occupation ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2250.00

Date of Receipt: 10 / 29 / 2010
Transaction ID: SA11.13959384
Amount of Each Receipt this Period: 250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SUSAN MONATH

Mailing Address 2001 KOOKUK ST APT 4

City IOWA CITY State IA Zip Code 52240-4430

FEC ID number of contributing federal political committee. **C**

Name of Employer UNEMPLOYED Occupation UNEMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 640.00

Date of Receipt: 11 / 16 / 2010
Transaction ID: SA11.13969273
Amount of Each Receipt this Period: 75.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JANE M. MONBRANA

Mailing Address 1016 N OREGON ST APT 5

City EL PASO State TX Zip Code 79902-4066

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13941401
Amount of Each Receipt this Period: 35.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 360.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1542 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JANE M. MONBRANA

Mailing Address 1016 N OREGON ST APT 5

City EL PASO State TX Zip Code 79902-4066

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt: 11 / 01 / 2010

Transaction ID: SA11.13963265

Amount of Each Receipt this Period: 55.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ARNALDO MONGE

Mailing Address 1305 WAKEHURST CT

City LEXINGTON State KY Zip Code 40509-2427

FEC ID number of contributing federal political committee. **C**

Name of Employer HAGYARD EQUINE MEDICAL INSTITUTE Occupation VETERINARIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt: 10 / 18 / 2010

Transaction ID: SA11.13932870

Amount of Each Receipt this Period: 101.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ARTHUR B. MONROE

Mailing Address 61 SO. VALLEY RD.

City PELHAM State MA Zip Code 01002-9768

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 27 / 2010

Transaction ID: SA11.13959345

Amount of Each Receipt this Period: 1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1156.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1543 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. KATHERINE W. MONROE		Date of Receipt
	Mailing Address P.O. BOX 518		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 1 / 1 2 / 2 0 1 0
	City	State	Zip Code
	IRVINGTON	VA	22480-0518
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13968151
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 151.00
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MR. CARLYLE N. MONTANYE, JR.		Date of Receipt
	Mailing Address P.O. BOX 14		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 0 / 2 0 1 0
	City	State	Zip Code
	GLYNDON	MD	21071-0014
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13944049
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 60.00
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MR. CARLYLE N. MONTANYE, JR.		Date of Receipt
	Mailing Address P.O. BOX 14		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 9 / 2 0 1 0
	City	State	Zip Code
	GLYNDON	MD	21071-0014
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13961825
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 260.00
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 471.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1544 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. THOMAS K. MONTAG
Mailing Address 127 E. 73RD ST.

City State Zip Code
NEW YORK NY 10021-3502

FEC ID number of contributing federal political committee. **C**

Name of Employer
BANK OF AMERICA MERRILL LYNCH

Occupation
PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13951055

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ALVARO MONTEALEGRE
Mailing Address 415 EMBASSY OAKS DR
SUITE 100

City State Zip Code
SAN ANTONIO TX 78216-2041

FEC ID number of contributing federal political committee. **C**

Name of Employer
MURO GROUP, INC.

Occupation
GENERAL MANAGEMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2010

Transaction ID: SA11.13928512

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ALVARO MONTEALEGRE
Mailing Address 415 EMBASSY OAKS DR
SUITE 100

City State Zip Code
SAN ANTONIO TX 78216-2041

FEC ID number of contributing federal political committee. **C**

Name of Employer
MURO GROUP, INC.

Occupation
GENERAL MANAGEMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
MM / DD / YYYY
11 / 18 / 2010

Transaction ID: SA11.13969809

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

2200.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1546 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. NEIL MONTGOMERY

Mailing Address 1925 HAWK HILL DR

City State Zip Code
HARTSVILLE SC 29550-9316

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950497

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. WILLIAM G. MONTGOMERY

Mailing Address 355 BUENA VISTA RD

City State Zip Code
ROYSE CITY TX 75189-6602

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962565

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. GERALD MONTIAGNE, JR.

Mailing Address 128 CROSSLANDS DR

City State Zip Code
KENNETT SQ PA 19348-2016

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 395.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943413

Amount of Each Receipt this Period

60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

310.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1547 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GERALD MONTIAGNE, JR.

Mailing Address 128 CROSSLANDS DR

City State Zip Code
KENNETT SQ PA 19348-2016

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 395.00

Date of Receipt: 11 / 22 / 2010
Transaction ID: SA11.13972806
Amount of Each Receipt this Period: 60.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RICHARD W. MOON

Mailing Address 2811 TURNBULL ST

City State Zip Code
OCEANSIDE CA 92054-3738

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13957586
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. FRANK S. MOONEY

Mailing Address 802 E STANFORD AVE

City State Zip Code
ENGLEWOOD CO 80113-5925

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13941604
Amount of Each Receipt this Period: 201.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 286.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1548 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. CLARENCE C. MOORE	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 437 BOSQUE CIR	Transaction ID: SA11.13952082
	City State Zip Code BLYTHEWOOD SC 29016-7927	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		

B.	Full Name (Last, First, Middle Initial) MR. DONALD M. MOORE, JR.	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 941 CAROL WAY	Transaction ID: SA11.13953790
	City State Zip Code EDMONDS WA 98020-2939	Amount of Each Receipt this Period 1.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 201.00		

C.	Full Name (Last, First, Middle Initial) MRS. DOROTHY E. MOORE	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 2016 S 15TH ST	Transaction ID: SA11.13943885
	City State Zip Code NILES MI 49120-4357	Amount of Each Receipt this Period 101.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 301.00		

SUBTOTAL of Receipts This Page (optional)	▶	177.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1549 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. EDWIN S. MOORE

Mailing Address 1320 REVELATION RD

City State Zip Code
JENKINTOWN PA 19046-1022

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 19 / 2010

Transaction ID: SA11.13970040

Amount of Each Receipt this Period
35.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. ELIZABETH R. MOORE

Mailing Address P.O. BOX 559

City State Zip Code
OCEAN PARK WA 98640-0559

FEC ID number of contributing federal political committee. **C**

Name of Employer HOME MAKER
Occupation HOME MAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
226.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 18 / 2010

Transaction ID: SA11.13933125

Amount of Each Receipt this Period
151.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. EVELEE C. MOORE

Mailing Address 102 CALADIUM DR

City State Zip Code
SAN ANTONIO TX 78213-2401

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
211.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 21 / 2010

Transaction ID: SA11.13946678

Amount of Each Receipt this Period
20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **206.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1550 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. EVELEE C. MOORE

Mailing Address 102 CALADIUM DR

City State Zip Code
SAN ANTONIO TX 78213-2401

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 211.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13947289
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. EVELEE C. MOORE

Mailing Address 102 CALADIUM DR

City State Zip Code
SAN ANTONIO TX 78213-2401

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 211.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13947312
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. EVELEE C. MOORE

Mailing Address 102 CALADIUM DR

City State Zip Code
SAN ANTONIO TX 78213-2401

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 211.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13948248
Amount of Each Receipt this Period: 1.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 51.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1551 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GARY MOORES

Mailing Address PO BOX 841

City State Zip Code
EUFAULA OK 74432-0841

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CONCORDE RESOURCES CORP. OIL & GAS PRODUCER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13951109

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JACK MOORE

Mailing Address 104 NOCCALULA CT

City State Zip Code
PRATTVILLE AL 36067-8422

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954512

Amount of Each Receipt this Period
150.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES R. MOORE

Mailing Address 1540 SAMONTEE RD

City State Zip Code
JACKSONVILLE FL 32211-5199

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928203

Amount of Each Receipt this Period
35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **2685.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1552 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES R. MOORE

Mailing Address 1540 SAMONTEE RD

City State Zip Code
JACKSONVILLE FL 32211-5199

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	1	0

Transaction ID: SA11.13946600

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAMES R. MOORE

Mailing Address 1540 SAMONTEE RD

City State Zip Code
JACKSONVILLE FL 32211-5199

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	1	0

Transaction ID: SA11.13971018

Amount of Each Receipt this Period

35.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JEFF G. MOORE

Mailing Address 1104 STONERIDGE DR

City State Zip Code
LAWRENCE KS 66049-4772

FEC ID number of contributing federal political committee. **C**

Name of Employer SPRINT Occupation PLANNER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 297.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	1	0

Transaction ID: SA11.13955924

Amount of Each Receipt this Period

99.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

159.00

TOTAL This Period (last page this line number only) ►

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1553 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) JOHN L. MOORE		Date of Receipt
	Mailing Address 1249 BOUQUET CIR.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 1 / 2 0 1 0
	City	State	Zip Code
	THOUSAND OAKS	CA	91362-2002
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13946159
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00	<input type="text"/> 30.00
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) LOIS L. MOORE		Date of Receipt
	Mailing Address 4100 MILLER RD.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 9 / 2 0 1 0
	City	State	Zip Code
	SPRINGFIELD	OH	45502-8623
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13942004
Name of Employer HOMEMAKER		Occupation HOMEMAKER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 265.00	<input type="text"/> 60.00
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) MR. MICHAEL MOORE		Date of Receipt
	Mailing Address 557 LINDLY ST		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 9 / 2 0 1 0
	City	State	Zip Code
	GRAND PRAIRIE	TX	75052-3415
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13941646
Name of Employer CAE SIMU FLITE		Occupation ENGINEER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 252.00	<input type="text"/> 26.00
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 116.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1554 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. PATRICK MOORE

Mailing Address 8169 S VALDAI CT

City State Zip Code
AURORA CO 80016-7258

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MARKETING COMPANY CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 11 / 19 / 2010
Transaction ID: SA11.13971145
Amount of Each Receipt this Period: 250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. PATRICIA MOORE

Mailing Address 5355 TARTAN LN.

City State Zip Code
COLUMBUS OH 43235-7379

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt: 11 / 22 / 2010
Transaction ID: SA11.13971591
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. PAULINE I. MOORE

Mailing Address 2424 E 28TH. ST.

City State Zip Code
TULSA OK 74114-5611

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED RANCHER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 820.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13940962
Amount of Each Receipt this Period: 300.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 575.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1555 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. TILLMAN M. MOORE	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 909 MARINE DR #104	Transaction ID: SA11.13932738
	City BELLINGHAM State WA Zip Code 98225-8462	Amount of Each Receipt this Period 101.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer PACIFIC COAST Occupation MEDICAL DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2060.00	

B.	Full Name (Last, First, Middle Initial) MR. WILLIAM W. MOORE	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 11980 TURTLE BEACH ROAD	Transaction ID: SA11.13940835
	City NORTH PALM BEACH State FL Zip Code 33408-2937	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00	

C.	Full Name (Last, First, Middle Initial) MARGARET EZELL MOORHEAD	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address P.O. BOX 53	Transaction ID: SA11.13933276
	City HOPKINSVILLE State KY Zip Code 42241-0053	Amount of Each Receipt this Period 251.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 711.00	

SUBTOTAL of Receipts This Page (optional)	552.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1556 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
BARBARA MOORMAN

Mailing Address 1451 BONNIE VIEW DR

City State Zip Code
EVANSVILLE IN 47715-6066

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13949120

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. PHILIP M. MORACE

Mailing Address 10 W END AVE APT 20B

City State Zip Code
NEW YORK NY 10023-7841

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13960763

Amount of Each Receipt this Period
150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. RALPH L. MORALES

Mailing Address 249 N 10TH AVE

City State Zip Code
UPLAND CA 91786-5432

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13948999

Amount of Each Receipt this Period
20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **195.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1557 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. SIEDEL E. MORAVITS

Mailing Address 239 MARTIN STREET

City UVALDE State TX Zip Code 78801-4337

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 811.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13956271
 Amount of Each Receipt this Period: 35.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. SIEDEL E. MORAVITS

Mailing Address 239 MARTIN STREET

City UVALDE State TX Zip Code 78801-4337

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 811.00

Date of Receipt: 10 / 29 / 2010
Transaction ID: SA11.13961848
 Amount of Each Receipt this Period: 35.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. SIEDEL E. MORAVITS

Mailing Address 239 MARTIN STREET

City UVALDE State TX Zip Code 78801-4337

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 811.00

Date of Receipt: 11 / 09 / 2010
Transaction ID: SA11.13967335
 Amount of Each Receipt this Period: 26.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 96.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1558 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ROY D. MOREHOUSE
Mailing Address 3851 N RIVER RD
City WEST LAFAYETTE State IN Zip Code 47906-3762
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00
Date of Receipt 10 / 20 / 2010
Transaction ID: SA11.13944284
Amount of Each Receipt this Period 1.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ELIAS MORENO, JR.
Mailing Address 1591 DIPLOMAT DRIVE
City BEAVERCREEK State OH Zip Code 45432-2503
FEC ID number of contributing federal political committee. **C**
Name of Employer SERCO INC Occupation LOGISTICS CONSULTANT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 411.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13933299
Amount of Each Receipt this Period 101.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. BARBARA V. MORGAN
Mailing Address 1638 44TH. AVE
City SAN FRANCISCO State CA Zip Code 94122-2933
FEC ID number of contributing federal political committee. **C**
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 213.00
Date of Receipt 10 / 28 / 2010
Transaction ID: SA11.13959791
Amount of Each Receipt this Period 25.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 127.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1559 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. BEN W. MORGAN

Mailing Address 122 MARINA DEL REY CT.

City State Zip Code
CLEARWATER FL 33767-2940

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation SALES

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	1	0

Transaction ID: SA11.13955926

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. FLORENCE MORGAN

Mailing Address 4110 TANGLE LANE

City State Zip Code
WINSTON SALEM NC 27106-2934

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 310.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	1	0

Transaction ID: SA11.13931501

Amount of Each Receipt this Period
75.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. JANE A. MORGAN

Mailing Address 213 RIVER HILLS CT.

City State Zip Code
MCKINNEY TX 75069-4218

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 267.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	1	0

Transaction ID: SA11.13950459

Amount of Each Receipt this Period
101.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **226.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1560 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. JEFFEREY L. MORGAN

Mailing Address 27 HORSESHOE LANE

City State Zip Code
ROLLING HILLS ESTA CA 90274-4823

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PALASERDIES SCHOOL DIST. HOUSE CLERK

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13960175

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. SEAN M. MORGAN

Mailing Address 515 FARM VIEW LANE

City State Zip Code
KALISPELL MT 59901-2144

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ING SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 0 / 2 0 1 0

Transaction ID: SA11.13967644

Amount of Each Receipt this Period
150.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. WILLIAM C. MORGAN

Mailing Address 16 WILDE ACRE ROAD

City State Zip Code
CHARLESTON WV 25314

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954927

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **450.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1561 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. WILLIAM M. MORGAN

Mailing Address P.O. BOX 13856

City State Zip Code
JACKSON MS 39236-3856

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 15 / 2010

Transaction ID: SA11.13968991

Amount of Each Receipt this Period

75.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. MARY E. MORIARTY

Mailing Address 20 PROSPECT HILL AVENUE

City State Zip Code
SUMMIT NJ 07901-3740

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
RETIRED

Aggregate Year-to-Date ▼
851.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 26 / 2010

Transaction ID: SA11.13956338

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
GARRISON MORIN

Mailing Address 1862 GOLDMILLER RD

City State Zip Code
BUNKER HILL WV 25413-3473

FEC ID number of contributing federal political committee. **C**

Name of Employer
MOUNTAIN STATE ENT CENTER

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
PHYSICIAN

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 17 / 2010

Transaction ID: SA11.13969901

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

425.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1562 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DAVID MORISETTE

Mailing Address **15600 268TH ST**

City **FORT RIPLEY** State **MN** Zip Code **56449-2065**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **255.00**

Date of Receipt **10 / 18 / 2010**
Transaction ID: SA11.13938311
 Amount of Each Receipt this Period **30.00**
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
H. BARCLAY MORLEY

Mailing Address **3 ANGELFISH CAY DR**

City **KEY LARGO** State **FL** Zip Code **33037-5205**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **10 / 26 / 2010**
Transaction ID: SA11.13957200
 Amount of Each Receipt this Period **100.00**
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ALBERTO L. MOROS

Mailing Address **105 BAYSPRINGS PL.**

City **SAVANNAH** State **GA** Zip Code **31405-1054**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GULFSTREAM** Occupation **PILOT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt **10 / 28 / 2010**
Transaction ID: SA11.13960159
 Amount of Each Receipt this Period **50.00**
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **180.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1563 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. DIANA L. MORRIS

Mailing Address 7006 STONE INLET DR

City State Zip Code
FORT BELVOIR VA 22060-7429

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959092

Amount of Each Receipt this Period

75.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. EDWARD MORRIS

Mailing Address 13777 BALLANTYNE CORPORATE PL
STE 400

City State Zip Code
CHARLOTTE NC 28277-3429

FEC ID number of contributing federal political committee. **C**

Name of Employer
AKIMA MGMT. SERVICES INC.

Occupation

C.E.O.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935060

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
GLYNN MORRIS

Mailing Address 355 REES STREET

City State Zip Code
PLAYA DEL REY CA 90293-7745

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946846

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

425.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1564 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ISAAC A. MORRIS

Mailing Address 2867 OUTLET ROAD

City State Zip Code
CLIFTON SPRINGS NY 14432-9742

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
G.W. LISH CO. INC ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 32400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948284

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

REFUND TO BE ISSUED

B. Full Name (Last, First, Middle Initial)
KAY MORRIS

Mailing Address 16822 SANDESTINE DR.

City State Zip Code
HOUSTON TX 77095-4700

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951408

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PATRICK MORRISEY

Mailing Address

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
KING & SPALDING ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13960649

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 4600.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1565 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. PATRICIA MORRIS

Mailing Address 506 W 22ND ST.

City State Zip Code
KANNAPOLIS NC 28081-2420

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937786

Amount of Each Receipt this Period
75.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RANDOPLH D. MORRISON

Mailing Address 10 ROBINSON RD

City State Zip Code
CHICHESTER NH 03258-6038

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MORRISON MANAGEMENT SVC CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 311.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953617

Amount of Each Receipt this Period
51.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RICHARD E. MORRISON

Mailing Address 425 GOLF VIEW DR

City State Zip Code
JACKSON AL 36545-3207

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928526

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 151.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1566 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. RICHARD E. MORRISON

Mailing Address 425 GOLF VIEW DR

City State Zip Code
JACKSON AL 36545-3207

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13969819

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ROBERT J. MORRICE

Mailing Address 17502 102ND AVE NE APT 124

City State Zip Code
BOTHELL WA 98011-6707

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 720.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940935

Amount of Each Receipt this Period

40.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ROBERT J. MORRICE

Mailing Address 17502 102ND AVE NE APT 124

City State Zip Code
BOTHELL WA 98011-6707

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 720.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13972889

Amount of Each Receipt this Period

40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

105.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1567 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. SUZANNE H. MORRISON

Mailing Address 320 COMMONS RD

City State Zip Code
ST SIMONS ISLAND GA 31522-9754

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955792

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. WILLIAM MORRIS

Mailing Address 1955 MILLBRIDGE RD.

City State Zip Code
SALEM VA 24153-4648

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
RETIRED

Aggregate Year-to-Date ▼
276.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956026

Amount of Each Receipt this Period

1.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. WILLIAM MORRIS

Mailing Address 1955 MILLBRIDGE RD.

City State Zip Code
SALEM VA 24153-4648

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
RETIRED

Aggregate Year-to-Date ▼
276.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Transaction ID: SA11.13968074

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

151.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1568 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. JAMI DANA MORSE HEIDEGGER

Mailing Address 19901 NORTHRIDGE RD.

City State Zip Code
CHATSWORTH CA 91311-1822

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MONARCH INTL. MAGAZINE PUBLISHER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 410.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956875

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
WILLIAM E. MORSE

Mailing Address 1426 CHATUGE CIR

City State Zip Code
HIAWASSEE GA 30546-1826

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956520

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. GARY MORSON

Mailing Address 2215 PAYNE STREET

City State Zip Code
EVANSTON IL 60201-2509

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NORTHWESTERN PROFESSOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 482.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13951071

Amount of Each Receipt this Period

39.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

389.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1569 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DAVIS MORTENSEN

Mailing Address 1661 SNUG HARBOR DRIVE

City Greensboro State GA Zip Code 30642-3735

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13937714
Amount of Each Receipt this Period 200.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAMES MORTON

Mailing Address 206 MICKELSON DRIVE

City New Bern State NC Zip Code 28560-3857

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13940663
Amount of Each Receipt this Period 40.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MARY R. MORTON

Mailing Address 2896 STIRRUP DR.

City Oakley State CA Zip Code 94561-1700

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13928868
Amount of Each Receipt this Period 200.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 440.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1570 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. W. HUGH MORTON

Mailing Address 1480 DRIFT ROAD

City WESTPORT State MA Zip Code 02790-1620

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13946215
Amount of Each Receipt this Period: 500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JUNE MOSBY

Mailing Address 1402 PARK ST

City SUMNER State WA Zip Code 98390-1718

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13957462
Amount of Each Receipt this Period: 75.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MARIE MOSE

Mailing Address 150 PLYMOUTH DR

City SCARSDALE State NY Zip Code 10583-6841

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13947233
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 600.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1571 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MARIE MOSE

Mailing Address 150 PLYMOUTH DR

City State Zip Code
SCARSDALE NY 10583-6841

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13971432

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. JOAN B. MOSELEY

Mailing Address 3115 ASHLAND CITY RD

City State Zip Code
CLARKSVILLE TN 37043-2610

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 395.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13947114

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RALEIGH W. MOSES

Mailing Address 2915 AMBER OAKS CT.

City State Zip Code
HERNDON VA 20171-4203

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936155

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **275.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1572 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. IRVING MOSKOWITZ

Mailing Address 21520 PIONEER BOULEVARD
SUITE 205

City State Zip Code
HAWAIIAN GARDENS CA 90716-2603

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13942465

Amount of Each Receipt this Period
20000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. NANETTE M. MOSS

Mailing Address 400 E CHURCH ST

City State Zip Code
ELMIRA NY 14901-2834

FEC ID number of contributing federal political committee. **C**

Name of Employer CHEMUNG COUNTY
Occupation SECRETARY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
336.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958599

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. NANETTE M. MOSS

Mailing Address 400 E CHURCH ST

City State Zip Code
ELMIRA NY 14901-2834

FEC ID number of contributing federal political committee. **C**

Name of Employer CHEMUNG COUNTY
Occupation SECRETARY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
336.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958918

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **20100.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1573 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. PAUL MOSSMAN	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 636 KAHA ST	Transaction ID: SA11.13932411
	City State Zip Code KAILUA HI 96734-2011	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation PFC,INC. CONTRACTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) MR. JOHN B. MOSTELLAR	Date of Receipt MM / DD / YYYY 11 / 19 / 2010
	Mailing Address P.O. BOX 8887	Transaction ID: SA11.13972195
	City State Zip Code MOBILE AL 36689-0887	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

C.	Full Name (Last, First, Middle Initial) MS. LISA K. MOTA	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 2860 EAGLE STREET	Transaction ID: SA11.13951309
	City State Zip Code SAN DIEGO CA 92103-5422	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional)	200.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1574 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. KENNETH MOTLEY

Mailing Address 2323 CRYSTAL SPRING AVE SW

City State Zip Code
ROANOKE VA 24014-2417

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961853

Amount of Each Receipt this Period
150.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. MARY V. MOULDER

Mailing Address 3747 PEACHTREE RD. NE APT. 307

City State Zip Code
ATLANTA GA 30319-1325

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931584

Amount of Each Receipt this Period
30.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. PAMELA S. MOULSDALE

Mailing Address 2301 CHOATE RD

City State Zip Code
FALLSTON MD 21047-1311

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 435.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962683

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 230.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1575 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DR. DESAI MOUNANG

Mailing Address 6003 ISLA VISTA

City State Zip Code
HOUSTON TX 77041-6057

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959407

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. GABRIELLA POLONY MOUNTAIN

Mailing Address 11317 JARBOE ST

City State Zip Code
KANSAS CITY MO 64114-5228

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS SCULPTOR

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 230.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939303

Amount of Each Receipt this Period

30.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. GABRIELLA POLONY MOUNTAIN

Mailing Address 11317 JARBOE ST

City State Zip Code
KANSAS CITY MO 64114-5228

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS SCULPTOR

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 230.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959705

Amount of Each Receipt this Period

35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5065.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1576 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. SATYA MOVVA

Mailing Address 5783 SUMMER STAR LN

City State Zip Code
FRISCO TX 75034-1981

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AMTEK CONSULTING SOFTWARE ENGINEER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13957613

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. RICHARD H. MOY

Mailing Address 25 WILDWOOD RD

City State Zip Code
SPRINGFIELD IL 62704-4359

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 550.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937107

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. CARROLL A. MOYERS

Mailing Address 21104 DOVESVILLE RD

City State Zip Code
BERGTON VA 22811-2211

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ACEN REG LIB LIBRAI

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929124

Amount of Each Receipt this Period

15.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

365.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1577 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. VANESSA M. MUCCINO	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 8522 TOWNE MANOR CT	Transaction ID: SA11.13931592
	City State Zip Code ALEXANDRIA VA 22309-4503	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer US INVESTIGATIONS	Occupation INVESTIGATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

B.	Full Name (Last, First, Middle Initial) WALTER MUELLER	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 1686 JOFFRE RD	Transaction ID: SA11.13932753
	City State Zip Code FORKED RIVER NJ 08731-5626	Amount of Each Receipt this Period 41.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 271.00	

C.	Full Name (Last, First, Middle Initial) WALTER MUELLER	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 1686 JOFFRE RD	Transaction ID: SA11.13949109
	City State Zip Code FORKED RIVER NJ 08731-5626	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 271.00	

SUBTOTAL of Receipts This Page (optional)	▶	116.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1578 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. GERMANO LAZZARO MULARONI		Date of Receipt
	Mailing Address 26212 GRAHAM RD.		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	REDFORD	MI	48239-3109
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GERMANO MGF COMPANY		Occupation PROPERTY DEVELOPMENT MANAGER	Transaction ID: SA11.13953954
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="100.00"/>
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) MR. HENRY MULHOLLAND		Date of Receipt
	Mailing Address 24 VALLEY RD.		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	PLANDOME	NY	11030-1437
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer BANK OF AMERICA MERRILL LYNCH		Occupation TRADER	Transaction ID: SA11.13951067
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="2500.00"/>	<input type="text" value="2500.00"/>
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) MR. GEORGE F. MULLER		Date of Receipt
	Mailing Address 4902 SHADY SIDE DR		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	ROANOKE	VA	24018-4822
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer RETIRED		Occupation RETIRED	Transaction ID: SA11.13959793
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="300.00"/>	<input type="text" value="50.00"/>
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="2650.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1579 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. JOHN E. MULLER	Date of Receipt MM / DD / YYYY 11 / 04 / 2010
	Mailing Address 1 SALEM RD.	Transaction ID: SA11.13965732
	City State Zip Code CARMEL NY 10512-6512	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

B.	Full Name (Last, First, Middle Initial) RICH MULLER	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 3017 WOODHOLLOW DR.	Transaction ID: SA11.13943043
	City State Zip Code FLOWER MOUND TX 75022-8477	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation REAL ESTATE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) MS. ETHEL F. MULLICAN	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 24300 HIPSLEY MILL RD	Transaction ID: SA11.13942605
	City State Zip Code GAITHERSBURG MD 20882-3132	Amount of Each Receipt this Period 210.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

SUBTOTAL of Receipts This Page (optional)	485.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1580 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. MARY N. MULLINIX	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 19129 HOLBERTON LANE	Transaction ID: SA11.13939472
	City State Zip Code BROOKEVILLE MD 20833-2633	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 825.00	

B.	Full Name (Last, First, Middle Initial) MR. JAMES G. MUMFORD	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 105 FARM LN	Transaction ID: SA11.13944724
	City State Zip Code WESTWOOD MA 02090-1109	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.00	

C.	Full Name (Last, First, Middle Initial) MR. JOHN P. MUNDY	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 444 W. 47TH ST	Transaction ID: SA11.13948179
	City State Zip Code MISSION HILLS KS 66208	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer LOCKTON COMPANIES	Occupation INSURANCE BROKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	650.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1581 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. TIMOTHY MUNGOVAN		Date of Receipt MM / DD / YYYY 11 / 10 / 2010
	Mailing Address 401 9TH STREET, NW SUITE 900		Transaction ID: SA11.13968703
	City WASHINGTON	State DC	Zip Code 20004-2145
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer NIXON & PEABODY Occupation ATTORNEY		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) MR. KENNETH MUNINGER, JR.		Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 6321 HERITAGE CT		Transaction ID: SA11.13933269
	City STILWELL	State KS	Zip Code 66085-9532
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 101.00
	Name of Employer SELF-EMPLOYED Occupation ACCOUNTANT		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 201.00	

C.	Full Name (Last, First, Middle Initial) DR. CARLOS E. MUNOZ		Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 100 LINCOLN RD APT 323		Transaction ID: SA11.13936285
	City MIAMI BEACH	State FL	Zip Code 33139-2013
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 205.00	

SUBTOTAL of Receipts This Page (optional)	▶	641.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1582 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. CARLOS E. MUNOZ

Mailing Address 100 LINCOLN RD APT 323

City State Zip Code
MIAMI BEACH FL 33139-2013

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950092

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ROBERT MURADYAN

Mailing Address 6641 BRAUN CT

City State Zip Code
ARVADA CO 80004-2132

FEC ID number of contributing federal political committee. **C**

Name of Employer SWISSLOG TRANS
Occupation DESIGN DRAFTSMAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
415.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929424

Amount of Each Receipt this Period
75.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. KENT MURDOCK

Mailing Address 2375 S 625 W

City State Zip Code
WOODS CROSS UT 84010-8182

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961323

Amount of Each Receipt this Period
35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **150.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1583 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. GEORGE MURPHY		Date of Receipt	
	Mailing Address 2409 COOLIDGE WAY		M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11.13936170
	RNCHO CORDOVA	CA	95670-3903	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		1000.00	
Name of Employer RETIRED		Occupation RETIRED		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		250.00		

B.	Full Name (Last, First, Middle Initial) MR. JOE P. MURPHY		Date of Receipt	
	Mailing Address 519 BLACKJACK OAK		M M / D D / Y Y Y Y Y 1 0 / 1 4 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11.13932250
	SHAVANO PARK	TX	78230-5637	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		10000.00	
Name of Employer MURPHY TOMATOES		Occupation SALES		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		10000.00		

C.	Full Name (Last, First, Middle Initial) MR. NEIL F. MURPHY		Date of Receipt	
	Mailing Address 226 MONTE VISTA DRIVE		M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11.13943163
	NAPA	CA	94559-2125	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		100.00	
Name of Employer M & R ENTERPRISES		Occupation INVESTOR		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		300.00		

SUBTOTAL of Receipts This Page (optional)	▶	10150.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1584 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) PATSY A. MURPHY	Date of Receipt MM / DD / YYYY 11 / 04 / 2010
	Mailing Address 4 JOHN STARK LN	Transaction ID: SA11.13965155
	City State Zip Code HAMPTON NH 03842-1026	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 700.00

B.	Full Name (Last, First, Middle Initial) MS. RITA R. MURPHY	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 5071 KILLOWEN COURT	Transaction ID: SA11.13947342
	City State Zip Code COLUMBUS OH 43230-4008	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer Occupation RETIRED RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00

C.	Full Name (Last, First, Middle Initial) MRS. SANDRA MURPHY	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 3115 SQUALICUM PKWY APT 229	Transaction ID: SA11.13955796
	City State Zip Code BELLINGHAM WA 98225-1943	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 340.00

SUBTOTAL of Receipts This Page (optional)	▶	280.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1585 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM C. MURPHY

Mailing Address **115 CONNA AVENUE**

City **STARKVILLE** State **MS** Zip Code **39759-4338**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **241.00**

Date of Receipt **10 / 19 / 2010**

Transaction ID: SA11.13940139

Amount of Each Receipt this Period **30.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BETTY MURRAY

Mailing Address **241 N VINE ST. APT. 608E**

City **SALT LAKE CTY** State **UT** Zip Code **84103-1943**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 19 / 2010**

Transaction ID: SA11.13939270

Amount of Each Receipt this Period **20.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. BONNIE L. MURRAY

Mailing Address **925 S 26TH. ST. APT. 113**

City **LOUISVILLE** State **KY** Zip Code **40210-1172**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **345.00**

Date of Receipt **10 / 21 / 2010**

Transaction ID: SA11.13947332

Amount of Each Receipt this Period **30.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **80.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1586 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. BONNIE L. MURRAY

Mailing Address 925 S 26TH. ST. APT. 113

City LOUISVILLE State KY Zip Code 40210-1172

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13956521
 Amount of Each Receipt this Period: 25.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. BONNIE L. MURRAY

Mailing Address 925 S 26TH. ST. APT. 113

City LOUISVILLE State KY Zip Code 40210-1172

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt: 11 / 22 / 2010
Transaction ID: SA11.13972771
 Amount of Each Receipt this Period: 25.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. SCOTT MURRAY

Mailing Address 1229 CAPRI DR

City PANAMA CITY State FL Zip Code 32405-4800

FEC ID number of contributing federal political committee. **C**

Name of Employer RYAN INTERNATIONAL Occupation PILOT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13945371
 Amount of Each Receipt this Period: 100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 150.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1587 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. SHANNON N. MURRAY

Mailing Address 5134 SHOREGATE DR.

City State Zip Code
GARLAND TX 75043-4234

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MEDICAL CITY DALLAS LIMITED OFFICE WORKER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt
MM / DD / YYYY
11 / 15 / 2010

Transaction ID: SA11.13967940

Amount of Each Receipt this Period
150.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ELIZABETH B. MURREY

Mailing Address 5895 GARDEN RIVER CV

City State Zip Code
MEMPHIS TN 38120-2501

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 750.00

Date of Receipt
MM / DD / YYYY
11 / 17 / 2010

Transaction ID: SA11.13969900

Amount of Each Receipt this Period
750.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JUDITH MURRELL

Mailing Address 1203 N EXPRESSWAY 77 UNIT 473

City State Zip Code
HARLINGEN TX 78552-4645

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 351.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13941425

Amount of Each Receipt this Period
1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 901.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1588 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
JUDITH MURRELL

Mailing Address 1203 N EXPRESSWAY 77 UNIT 473

City State Zip Code
HARLINGEN TX 78552-4645

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 351.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944550

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JAMES MUSIC

Mailing Address P.O. BOX 648

City State Zip Code
WEST VAN LEAR KY 41268-0648

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13969401

Amount of Each Receipt this Period

75.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. CONSTANCE MUSSETTER

Mailing Address 79297 SIGN OF SPG

City State Zip Code
LA QUINTA CA 92253-6364

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PALM DESERT ACE HARDWARE CASHIER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13932107

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1589 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. HELEN MUSSER

Mailing Address 818 GRIFFITH AVE.

City TERRELL State TX Zip Code 75160-1547

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation ARTIST/HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 21 / 2010
Transaction ID: SA11.13943012
Amount of Each Receipt this Period 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN K. MUTZ

Mailing Address 808 VICTORY LANE

City MARYVILLE State MO Zip Code 64468-3800

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13941297
Amount of Each Receipt this Period 150.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MISS EVELYN MYERCHIN

Mailing Address 1005 SE 77TH CT

City VANCOUVER State WA Zip Code 98664-1792

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 02 / 2010
Transaction ID: SA11.13964785
Amount of Each Receipt this Period 25.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 275.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1590 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. CHARLES R. MYERS	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 2724 SYLVAN WAY	Transaction ID: SA11.13941017
	City State Zip Code MCKINNEY TX 75070-4049	Amount of Each Receipt this Period 320.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS SALEM ELECTRIC CO		Occupation INFORMATION REQUESTED PER BEST EFFORTS ELECTRICAL CONTRACTOR
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 640.00

B.	Full Name (Last, First, Middle Initial) FRANK B. MYERS	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 100 BRANDON PL.	Transaction ID: SA11.13935482
	City State Zip Code WINSTON SALEM NC 27104-1806	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS SALEM ELECTRIC CO		Occupation INFORMATION REQUESTED PER BEST EFFORTS ELECTRICAL CONTRACTOR
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1500.00

C.	Full Name (Last, First, Middle Initial) MRS. JOAN MYERS	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 13580 GOODALL RD	Transaction ID: SA11.13958892
	City State Zip Code LAKE OSWEGO OR 97034-2075	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS SALEM ELECTRIC CO		Occupation INFORMATION REQUESTED PER BEST EFFORTS ELECTRICAL CONTRACTOR
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00

SUBTOTAL of Receipts This Page (optional)	▶	845.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1591 / 3187	
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. KAY MYERS		Date of Receipt
	Mailing Address 1111AS MITCHELL ST		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 26 / 2010
	City	State	Zip Code
	WARRENSBURG	MO	64093
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13957551
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 317.50	<input type="text"/> 55.00
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) ROBERT MYERS		Date of Receipt
	Mailing Address 285 GREENS FANNS RD.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 22 / 2010
	City	State	Zip Code
	WESTPORT	CT	06880
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13950294
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 360.00	<input type="text"/> 10.00
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) ROBERT L. MYERS		Date of Receipt
	Mailing Address 1127 MCDONALD ST		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 15 / 2010
	City	State	Zip Code
	EUREKA	CA	95503-4969
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13928092
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 470.00	<input type="text"/> 210.00
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 275.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1592 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RONALD MYERS

Mailing Address 107 LARCHMONT DRIVE

City State Zip Code
TRUMANSBURG NY 14886-9725

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951601

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. SALLY A. MYERS

Mailing Address PO BOX 1818

City State Zip Code
TEMECULA CA 92593-1818

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SIZZLER RESTAURANTS FRANCHISEE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962708

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WALTER E. MYERS, JR.

Mailing Address 3818 SUGARLOAF PKWY.

City State Zip Code
FREDERICK MD 21704-7900

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MONTGOMERY COUNTY MARYLAND PERMIT TECHNICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943627

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 190.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1593 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
WALTER E. MYERS, JR.
Mailing Address 3818 SUGARLOAF PKWY.
City State Zip Code
FREDERICK MD 21704-7900
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
MONTGOMERY COUNTY MARYLAND PERMIT TECHNICIAN
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 11 / 19 / 2010
Transaction ID: SA11.13972099
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. DIANNE H. NABORS
Mailing Address 323 ABINGTON ST.
City State Zip Code
PRATTVILLE AL 36066-5551
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
RETIRED RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 385.00
Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13941775
Amount of Each Receipt this Period: 39.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. DIANNE H. NABORS
Mailing Address 323 ABINGTON ST.
City State Zip Code
PRATTVILLE AL 36066-5551
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
RETIRED RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 385.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13951969
Amount of Each Receipt this Period: 26.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 115.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1594 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. DIANNE H. NABORS	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 323 ABINGTON ST.	Transaction ID: SA11.13952914
	City State Zip Code PRATTVILLE AL 36066-5551	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00	

B.	Full Name (Last, First, Middle Initial) MR. BRYAN NACE	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 9200 MITCHELL BEND CT	Transaction ID: SA11.13932419
	City State Zip Code GRANBURY TX 76048-7725	Amount of Each Receipt this Period 39.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer GHZ COMMUNICATIONS	Occupation SELF-EMPLOYED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 239.00	

C.	Full Name (Last, First, Middle Initial) MR. SHERMAN NAGLER	Date of Receipt MM / DD / YYYY 10 / 29 / 2010
	Mailing Address 5135 BRAESVALLEY DR	Transaction ID: SA11.13961424
	City State Zip Code HOUSTON TX 77096-2609	Amount of Each Receipt this Period 110.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation SELF-EMPLOYED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional)	▶	164.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1595 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. JAYAMALA A. NAIDU		Date of Receipt
	Mailing Address 220 BLUESTONE PL		<input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	CASSELBERRY	FL	32707-4147
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13918442
Name of Employer SALES		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="210.00"/>
		<input type="text" value="470.00"/>	CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MR. JAMES F. NAJA		Date of Receipt
	Mailing Address 21660 W MAC GREGOR DR		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	NEW BERLIN	WI	53146-4744
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13941745
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="51.00"/>
		<input type="text" value="201.00"/>	CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MR. YOSHIRO NAKAMURA		Date of Receipt
	Mailing Address 710 OLIVE AVE		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	WAHIAWA	HI	96786
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13947789
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="400.00"/>
		<input type="text" value="400.00"/>	CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="661.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1596 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. YUKI NAKASHIMA

Mailing Address 3279 GLENDON AVE
APT 6

City State Zip Code
LOS ANGELES CA 90034

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED MIDARIARY SERVICES

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 642.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946750

Amount of Each Receipt this Period
101.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM D. NALLY

Mailing Address 9125 CONCORD HUNT CIRCLE

City State Zip Code
BRENTWOOD TN 37027-8762

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NH DENTAL PARTNERS, PLLC (MANAGING PAR DENTIST

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941830

Amount of Each Receipt this Period
150.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HENRY NAPIER

Mailing Address 1912 N UNION AVE

City State Zip Code
OZARK AL 36360-7216

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 420.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 7 / 2 0 1 0

Transaction ID: SA11.13969878

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 351.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1597 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DR. SALAH NASSER	Date of Receipt MM / DD / YYYY 11 / 02 / 2010
	Mailing Address 40 BROOKSIDE DRIVE	Transaction ID: SA11.13962538
	City State Zip Code ATHENS PA 18810-8900	Amount of Each Receipt this Period 110.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer GUTHRIE CLINIC	Occupation PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1645.00	

B.	Full Name (Last, First, Middle Initial) JAMES J. NAYLOR	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 769 BERLIN RD	Transaction ID: SA11.13956775
	City State Zip Code WILMINGTON OH 45177-7830	Amount of Each Receipt this Period 26.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 226.00	

C.	Full Name (Last, First, Middle Initial) MRS. ANGELA S. NEAL	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 7600 KENNEDY RD.	Transaction ID: SA11.13945760
	City State Zip Code NOKESVILLE VA 20181-5847	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00	

SUBTOTAL of Receipts This Page (optional)	▶	186.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1598 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. C. E. NEAL, JR.
Mailing Address P.O. BOX 41
City State Zip Code
FAIRFIELD TX 75840-0001
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation REAL ESTATE BROKER
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 640.00
Date of Receipt 10 / 29 / 2010
Transaction ID: SA11.13961906
Amount of Each Receipt this Period 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JIM NEAL
Mailing Address P.O. BOX 1676
City State Zip Code
ADA OK 74821-1676
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation RANCHER
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 440.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13937179
Amount of Each Receipt this Period 50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JIM NEAL
Mailing Address P.O. BOX 1676
City State Zip Code
ADA OK 74821-1676
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation RANCHER
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 440.00
Date of Receipt 10 / 26 / 2010
Transaction ID: SA11.13956274
Amount of Each Receipt this Period 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 150.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1599 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. STEVE C. NEAL

Mailing Address 5515 HUFFMAN DR

City State Zip Code
KECHI KS 67067-9003

FEC ID number of contributing federal political committee. C

Name of Employer
SELF-EMPLOYED

Occupation
PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 19 / 2010

Transaction ID: SA11.13931537

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. THOMAS H. NEALE

Mailing Address 2325 42ND ST. NW
#404

City State Zip Code
WASHINGTON DC 20007-4958

FEC ID number of contributing federal political committee. C

Name of Employer
LIBRARY OF CONGRESS

Occupation
POLICY ANALYST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 25 / 2010

Transaction ID: SA11.13957954

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DR. HENRY G. NEBEKER, JR.

Mailing Address 3783 WINFORD DR

City State Zip Code
TARZANA CA 91356-5808

FEC ID number of contributing federal political committee. C

Name of Employer
SELF-EMPLOYED

Occupation
PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 25 / 2010

Transaction ID: SA11.13953449

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 2050.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1600 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
VENITA NEEDHAM

Mailing Address **715 ANNA ST.**

City **MOSCOW** State **ID** Zip Code **83843-3509**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **10 / 27 / 2010**
Transaction ID: SA11.13958652
 Amount of Each Receipt this Period **50.00**
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CARL A. NEFF

Mailing Address **8187 STATE ROUTE 43**

City **STREETSBORO** State **OH** Zip Code **44241-5864**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **845.00**

Date of Receipt **10 / 28 / 2010**
Transaction ID: SA11.13960255
 Amount of Each Receipt this Period **75.00**
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. SCOTT B. NEFF

Mailing Address **9520 MILLS CIVIC PKWY**

City **WEST DES MOINES** State **IA** Zip Code **50266-3841**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CENTRAL IOWA ORTHO** Occupation **SURGEON**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **10 / 27 / 2010**
Transaction ID: SA11.13955882
 Amount of Each Receipt this Period **600.00**
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **725.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1601 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CLYDE A. NEIBAUR

Mailing Address 1210 NEIBAUR MOUNTAIN RD

City State Zip Code
BANCROFT ID 83217-5166

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
411.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951493

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT NEILSON

Mailing Address 258 THOMAS LN

City State Zip Code
STOWE VT 05672-5060

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941918

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. EDWARD S. NEISS

Mailing Address 200 CHARTER OAK DR.

City State Zip Code
NEW CANAAN CT 06840-6703

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949953

Amount of Each Receipt this Period
150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **250.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1602 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CHAD R. NELSON

Mailing Address 1705 TROY LN N

City State Zip Code
MINNEAPOLIS MN 55447-2547

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2010

Transaction ID: SA11.13962529

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DANIELLE NELSON

Mailing Address 930 WESTBOURNE DR. APT. 100

City State Zip Code
W HOLLYWOOD CA 90069-4129

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NELSON MANAGEMENT CO APARTMENT MANAGEMENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13963224

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID K. NELSON

Mailing Address 25862 JASPER RD
APT 6

City State Zip Code
BARSTOW CA 92311-7202

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CENTER FOR ARMY LESSONS LEARNED ANALYST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2010

Transaction ID: SA11.13951428

Amount of Each Receipt this Period
75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **675.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1603 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. DONALD H. NELSON	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address P.O. BOX 401458	Transaction ID: SA11.13956675
	City State Zip Code HESPERIA CA 92340-1458	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

B.	Full Name (Last, First, Middle Initial) MR. DOUGLAS O. NELSON	Date of Receipt MM / DD / YYYY 11 / 02 / 2010
	Mailing Address 12031 HUNTING CREST DR.	Transaction ID: SA11.13962699
	City State Zip Code PROSPECT KY 40059-9176	Amount of Each Receipt this Period 210.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00	

C.	Full Name (Last, First, Middle Initial) MRS. ELIZABETH M. NELSON	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 20 ROLLINGWOOD DR SPC 131	Transaction ID: SA11.13933104
	City State Zip Code JACKSON CA 95642-9446	Amount of Each Receipt this Period 26.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 346.00	

SUBTOTAL of Receipts This Page (optional)	286.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1604 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
ILABELLE NELSON

Mailing Address 10103 131ST AVE SW

City State Zip Code
SCRANTON ND 58653-9293

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 291.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932745

Amount of Each Receipt this Period

151.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. MIKE NELSON

Mailing Address 4040 MANLY RD

City State Zip Code
ROSAMOND CA 93560-6930

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RESERVE SYSTEMS INC BUSINESS OWNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 470.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13957720

Amount of Each Receipt this Period

210.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. RANDOLPH M. NELSON

Mailing Address 35 WEST 76TH STREET

City State Zip Code
NEW YORK NY 10023-1503

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SANGUINE GAS EXPLORATION EXECUTIVE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13945251

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2861.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1605 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ROBERT J. NELSON

Mailing Address 1050 20TH ST

City State Zip Code
CEYLON MN 56121-1106

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NELSON FARMS FARMER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 370.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929627

Amount of Each Receipt this Period
95.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MISS RUTH L. NELSON

Mailing Address 1116 MACE AVE

City State Zip Code
BRONX NY 10469-5305

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939368

Amount of Each Receipt this Period
15.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MISS RUTH L. NELSON

Mailing Address 1116 MACE AVE

City State Zip Code
BRONX NY 10469-5305

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948616

Amount of Each Receipt this Period
15.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

125.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1606 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. STEVEN NELSON

Mailing Address 217 CHARLESTON DR

City State Zip Code
VICTORIA TX 77904-3826

FEC ID number of contributing federal political committee. **C**

Name of Employer: INFORMATION REQUESTED PER BEST EFFORTS
Occupation: INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt: 11 / 02 / 2010
Transaction ID: SA11.13964820
Amount of Each Receipt this Period: 35.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ART NERHEIM

Mailing Address 2821 MCCRAYS MILL RD

City State Zip Code
SUMTER SC 29154-6005

FEC ID number of contributing federal political committee. **C**

Name of Employer: DYNACORP INTL.
Occupation: SUPPLY TECHNICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
531.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13935758
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM C. NESHEIM

Mailing Address 2700 HIDDEN CREEK LANE

City State Zip Code
WAYZATA MN 55391-2559

FEC ID number of contributing federal political committee. **C**

Name of Employer: PRECISION ARTS INC.
Occupation: SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13941303
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **185.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1607 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. ROBERT L. NET	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 1 0
	Mailing Address F28 CALLE CALZADA URB EL REMANSO	Transaction ID: SA11.13932677
	City State Zip Code SAN JUAN PR 00926-6110	Amount of Each Receipt this Period 21.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 226.00	

B.	Full Name (Last, First, Middle Initial) MR. ROBERT L. NET	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 1 0
	Mailing Address F28 CALLE CALZADA URB EL REMANSO	Transaction ID: SA11.13937181
	City State Zip Code SAN JUAN PR 00926-6110	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 226.00	

C.	Full Name (Last, First, Middle Initial) MR. PHILIP R. NEUHAUS	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	Mailing Address 407 THAMER LN STE 2100	Transaction ID: SA11.13951697
	City State Zip Code HOUSTON TX 77024-6939	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer WELLS FARGO ADVISOR Occupation SENIOR VICE PRESIDENT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	201.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1608 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. HANS NEUMAIER	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 31 WOODBURY PL	Transaction ID: SA11.13951582
	City ROCHESTER State NY Zip Code 14618-3440	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 585.00	

B.	Full Name (Last, First, Middle Initial) MS. SHIRLEY NEUMANN	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 18954 BEVERLY RD	Transaction ID: SA11.13918660
	City BEVERLY HILLS State MI Zip Code 48025-4015	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

C.	Full Name (Last, First, Middle Initial) MR. BARNEY J. NEUSFELD	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address P.O. BOX 6103	Transaction ID: SA11.13950558
	City CARMEL BY THE State CA Zip Code 93921-6103	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	▶	265.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1609 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JACQUELINE NEVITT

Mailing Address 6745 COLTON BLVD.

City OAKLAND State CA Zip Code 94611-2348

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt: 10 / 29 / 2010
Transaction ID: SA11.13962026
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RICHARD L. NEWACHECK

Mailing Address 819 MOUNTAIN VIEW DRIVE

City LAFAYETTE State CA Zip Code 94549-4213

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 477.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13937934
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. EDWARD J. NEWBERRY

Mailing Address 8214 HUNTING HILL LANE

City MCLEAN State VA Zip Code 22102-1303

FEC ID number of contributing federal political committee. **C**

Name of Employer PATTON BOGGS Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13957923
Amount of Each Receipt this Period: 2000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 2065.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1610 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. RICHARD A. NEWBERRY		Date of Receipt
	Mailing Address 21390 CHERI LN		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	BRISTOL	IN	46507-9323
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: SA11.13955824
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	<input type="text" value="200.00"/>
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MR. CAROL NEWBROUGH		Date of Receipt
	Mailing Address 3519 CINCO LAKES DR		<input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	KATY	TX	77450-5748
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: SA11.13945744
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="650.00"/>	<input type="text" value="100.00"/>
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MR. WALTER NEWCOMB		Date of Receipt
	Mailing Address 585 CHESTNUT ST APT 1203		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	ABINGTON	MA	02351-1048
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: SA11.13936855
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="280.00"/>	<input type="text" value="40.00"/>
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="340.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1611 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. STEPHAN F. NEWHOUSE

Mailing Address 600 COCONUT PALM RD

City State Zip Code
VERO BEACH FL 32963-3713

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MORGAN STANLEY PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13932244

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BRADLEY D. NEWMAN

Mailing Address 10301 W STERLING CT

City State Zip Code
WICHITA KS 67205-1566

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BRAD NEWMAN CONTRACTING CONTRACTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962577

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CORBY D. NEWMAN

Mailing Address 1140 FLORENCE LN.

City State Zip Code
WILLMAR MN 56201-3073

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934126

Amount of Each Receipt this Period
15.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 2615.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1612 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) HOWARD NEWMAN	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 1800 DEVON ROAD	Transaction ID: SA11.13932283
	City PASADENA State CA Zip Code 91103-1145	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer SELF-EMPLOYED Occupation SURGEON Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 500.00	

B.	Full Name (Last, First, Middle Initial) MS. MARIE M. NEWMAN	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 715 N 163RD ST	Transaction ID: SA11.13939723
	City OMAHA State NE Zip Code 68118-2507	Amount of Each Receipt this Period 101.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 376.00	

C.	Full Name (Last, First, Middle Initial) MS. JOAN W. NEWTON	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address ONE INDEPENDENT DR. SUITE 114	Transaction ID: SA11.13942498
	City JACKSONVILLE State FL Zip Code 32202-5039	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 2500.00	

SUBTOTAL of Receipts This Page (optional)	3101.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1613 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. RUSSELL NEWTON	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 200 W. FORSYTH STREET SUITE 1600	Transaction ID: SA11.13942499
	City JACKSONVILLE State FL Zip Code 32202-4358	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer TIMUCUAN ASSET MANAGEMENT Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) MR. GEORGE J. NEYREY, III	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 1100 E. WILLIAM DAVID PKWY	Transaction ID: SA11.13934646
	City METAIRIE State LA Zip Code 70005-1639	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

C.	Full Name (Last, First, Middle Initial) MR. GEORGE J. NEYREY, III	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 1100 E. WILLIAM DAVID PKWY	Transaction ID: SA11.13935305
	City METAIRIE State LA Zip Code 70005-1639	Amount of Each Receipt this Period 1.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

SUBTOTAL of Receipts This Page (optional)	▶	1101.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1614 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) NGOINGO		Date of Receipt
	Mailing Address 5815 88TH CRES N		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	MINNEAPOLIS	MN	55443-3980
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13940501
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="250.00"/>
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) MR. CINDY NGUYEN		Date of Receipt
	Mailing Address 11927 PALMETTO SHORE DR		<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	HOUSTON	TX	77065-3994
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer RETIRED		Occupation RETIRED	Transaction ID: SA11.13948965
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="302.00"/>	<input type="text" value="150.00"/>
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) QUYEN NGUYEN		Date of Receipt
	Mailing Address 1725 ROME AVE		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	SAINT PAUL	MN	55116-2425
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13940364
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="240.00"/>	<input type="text" value="40.00"/>
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="440.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1615 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
QUYEN NGUYEN

Mailing Address 1725 ROME AVE

City State Zip Code
SAINT PAUL MN 55116-2425

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	1	0

Transaction ID: SA11.13940569

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. DONNA JEANE NIBBELINK

Mailing Address 23034 PARKVIEW DRIVE

City State Zip Code
NEWHALL CA 91321-3600

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	4	/	2	0	1	0

Transaction ID: SA11.13928411

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. YVONNE NIBERT

Mailing Address 1 HORIZON POINTE LANE

City State Zip Code
SALEM SC 29676-4332

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
620.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	1	0

Transaction ID: SA11.13950521

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **2240.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1616 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

CHARLIE NIBLETT

Mailing Address P.O. BOX 625

City State Zip Code
ELDORADO TX 76936-0625

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 506.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936635

Amount of Each Receipt this Period

1.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WHISMAN NICELEY

Mailing Address 1216 OLD WEISGARVER ROAD

City State Zip Code
KNOXVILLE TN 37909-2639

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 510.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928267

Amount of Each Receipt this Period

70.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. EDWARD L. NICHOLSON

Mailing Address 4051 DAVENPORT DR.

City State Zip Code
HUNTINGTN BCH CA 92649-4223

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930127

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

221.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1617 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. GAYLORD NICHOLS	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 852 S OAKLAND AVE	Transaction ID: SA11.13928107
	City State Zip Code PASADENA CA 91106-3725	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) MR. JOHN T. NICHOLS	Date of Receipt MM / DD / YYYY 10 / 23 / 2010
	Mailing Address 12212 STONEYBROOK DR	Transaction ID: SA11.13947656
	City State Zip Code MANASSAS VA 20112-3504	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer DBA/SYSTEMS, INC.	Occupation SCIENTIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) MRS. KAREN NICHOLS	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 3802 S UNION RD	Transaction ID: SA11.13929554
	City State Zip Code SPOKANE VALLEY WA 99206-6335	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer HARVEST FOODS	Occupation GROCERY CASHIER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional)	▶	1225.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1618 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. KENDALL E. NICHOLS

Mailing Address 17081 300 ROAD

City State Zip Code
SMITH CENTER KS 66967-6529

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933562

Amount of Each Receipt this Period

75.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
LYNN M. NICHOLS

Mailing Address 3902 E RANCHO DR

City State Zip Code
PARADISE VALLEY AZ 85253-5025

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 580.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931577

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. RICHARD L. NICHOLAS

Mailing Address 1129 DRYDEN LANE

City State Zip Code
CHARLOTTESVILLE VA 22903-7673

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932484

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

275.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1619 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. TERESA D. NICHOLS	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 4022 DIABLO CIR	Transaction ID: SA11.13947760
	City State Zip Code HUNTINGTON BEACH CA 92649-3001	Amount of Each Receipt this Period 410.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 760.00	

B.	Full Name (Last, First, Middle Initial) WILLIAM NICHOLS, JR.	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 1028 BARKLEY DR.	Transaction ID: SA11.13946564
	City State Zip Code BIRMINGHAM AL 35242-4669	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer KBR ENGINEERING	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) WILLIAM NICHOLS, JR.	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 1028 BARKLEY DR.	Transaction ID: SA11.13958352
	City State Zip Code BIRMINGHAM AL 35242-4669	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer KBR ENGINEERING	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)	▶	490.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1620 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
WILLIAM NICHOLS, JR.
Mailing Address 1028 BARKLEY DR.
City BIRMINGHAM State AL Zip Code 35242-4669
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 11 / 19 / 2010
Transaction ID: SA11.13972145
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

Name of Employer: KBR ENGINEERING Occupation: INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: Primary General Other (specify) Aggregate Year-to-Date: 240.00

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM E. NICHOLS
Mailing Address 520 OAKLAND AVE
City WILLIAMSPORT State PA Zip Code 17701-2004
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 11 / 03 / 2010
Transaction ID: SA11.13965334
Amount of Each Receipt this Period: 105.00
CONTRIBUTION

Name of Employer: RETIRED Occupation: RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date: 520.00

C. Full Name (Last, First, Middle Initial)
MR. BETTY NICOLAY
Mailing Address 29875 BRADMOOR CT
City FARMINGTON HILLS State MI Zip Code 48334-3272
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13943653
Amount of Each Receipt this Period: 200.00
CONTRIBUTION

Name of Employer: INFORMATION REQUESTED PER BEST EFFORTS Occupation: INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: Primary General Other (specify) Aggregate Year-to-Date: 400.00

SUBTOTAL of Receipts This Page (optional) **345.00**

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1621 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. BOBBY NICOLLS

Mailing Address 8689 SELLY RD

City State Zip Code
PARKER CO 80134-5753

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13931782

Amount of Each Receipt this Period
210.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MILDRED W. NIEHAUS

Mailing Address 26 MCNISH RD

City State Zip Code
SOUTHERN PINES NC 28387-2154

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
202.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.1393274

Amount of Each Receipt this Period
101.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. THOMAS A. NIEHAUS

Mailing Address 5933 HEADGATES RD.

City State Zip Code
HAMILTON OH 45011-2054

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
251.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13932573

Amount of Each Receipt this Period
1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **312.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1622 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. THOMAS A. NIEHAUS

Mailing Address **5933 HEADGATES RD.**

City **HAMILTON** State **OH** Zip Code **45011-2054**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **251.00**

Date of Receipt **10 / 18 / 2010**

Transaction ID: SA11.13933446

Amount of Each Receipt this Period **150.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LELAND NIELSON

Mailing Address **19069 S PIONEER CROSSING LN**

City **ESTACADA** State **OR** Zip Code **97023-9687**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt **11 / 01 / 2010**

Transaction ID: SA11.13963008

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PHILIP R. NIELSEN

Mailing Address **200 DEWINDT ROAD**

City **WINNETKA** State **IL** Zip Code **60093-3711**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **10 / 18 / 2010**

Transaction ID: SA11.13935496

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **350.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1623 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. STEPHEN H. NIEMEIER

Mailing Address 2619 TIMBER RIDGE DRIVE

City State Zip Code
TEMPLE TX 76502-8804

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BGFN, PC C.P.A.

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 850.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918867

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. ELEANOR M. NIERLING

Mailing Address 526 GLADIOLA STREET

City State Zip Code
GOLDEN CO 80401-5255

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 241.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944630

Amount of Each Receipt this Period

26.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. JANE NIERMAN

Mailing Address 6782 LEMPIRA CT.

City State Zip Code
HOUSTON TX 77069-1764

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SHELL OIL CO. CONTRACTS MAR.

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943608

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

326.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1624 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. NANCY M. NILSSON

Mailing Address 805 FARLEY DR SE

City State Zip Code
HUNTSVILLE AL 35802-3709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13971658

Amount of Each Receipt this Period
90.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. STIG L. NILSSON

Mailing Address 20715 BRUSH RD

City State Zip Code
LOS GATOS CA 95033-9138

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EXPONET INC ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956206

Amount of Each Receipt this Period
101.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. FRED NINDE

Mailing Address 3959 E 400 N

City State Zip Code
PORTLAND IN 47371-7934

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED FARMER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 412.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933181

Amount of Each Receipt this Period
51.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 242.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1625 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RICHARD M. NINESTEEL

Mailing Address 1188 PINWOOD DR

City State Zip Code
PITTSBURGH PA 15243-1810

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TETRA TECH ENGINEER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 1 0

Transaction ID: SA11.13947734

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GENE A. NINNEMANN

Mailing Address 3164 CYMAR DR.

City State Zip Code
DAYTON OH 45434-6373

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943378

Amount of Each Receipt this Period
20.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN W. NITZ

Mailing Address 1053 E CROWN POINTE BLVD

City State Zip Code
GREENSBURG IN 47240-7970

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963254

Amount of Each Receipt this Period
20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 290.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1626 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DEWAYNE NIX

Mailing Address 408 DUNDEE ST

City State Zip Code
VICTORIA TX 77904-2875

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 255.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13938139

Amount of Each Receipt this Period
45.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. JOHN M. NOACK, M.D.

Mailing Address 5350 CASTLEWOOD ROAD

City State Zip Code
DALLAS TX 75229-4313

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS ORTHOPEDIC SURGEON

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13951133

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES N. NOBLE

Mailing Address 312 S OCEAN TRACE RD.

City State Zip Code
ST AUGUSTINE FL 32080-6166

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 342.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932600

Amount of Each Receipt this Period
11.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **556.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1627 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. JAMES N. NOBLE	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 312 S OCEAN TRACE RD.	Transaction ID: SA11.13954217
	City State Zip Code ST AUGUSTINE FL 32080-6166	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 342.00	

B.	Full Name (Last, First, Middle Initial) MR. JOSEPH E. NOBLES	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 5566 E HINSDALE CIR	Transaction ID: SA11.13945359
	City State Zip Code CENTENNIAL CO 80122-2538	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation ORACLE CORP. SALES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) MR. JAMES W. NOBLITT	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 754 CORTE ALHAMBRA	Transaction ID: SA11.13957724
	City State Zip Code VACAVILLE CA 95688-2024	Amount of Each Receipt this Period 110.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 361.00	

SUBTOTAL of Receipts This Page (optional)	▶	230.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1628 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. THEDA P. NOE

Mailing Address 9912 GERONIMO DR

City State Zip Code
NORMAN OK 73026-5918

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
881.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959983

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. AGNES F. NOLAN

Mailing Address 530 EAST 79TH STREET

City State Zip Code
NEW YORK NY 10075-1501

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13961175

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DAVID NOLAN

Mailing Address 105 EAST 80TH STREET

City State Zip Code
NEW YORK NY 10075-0305

FEC ID number of contributing federal political committee. **C**

Name of Employer MILLENNIUM PARTNERS Occupation FINANCE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13932428

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1400.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1629 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial) MR. JAMES M. NOLAN		Date of Receipt MM / DD / YYYY 10 / 14 / 2010
Mailing Address 8820 WALTHER BLVD BLVD APT 451 APARTMENT 4519		Transaction ID: SA11.13930196
City PARKVILLE	State MD	Zip Code 21234-9025
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 101.00
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

B.

Full Name (Last, First, Middle Initial) MR. WILLIAM H. NOLAND		Date of Receipt MM / DD / YYYY 10 / 14 / 2010
Mailing Address 215 AMHERST DR NE		Transaction ID: SA11.13929840
City ALBUQUERQUE	State NM	Zip Code 87106-1304
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 316.00	

C.

Full Name (Last, First, Middle Initial) MR. WILLIAM H. NOLAND		Date of Receipt MM / DD / YYYY 10 / 19 / 2010
Mailing Address 215 AMHERST DR NE		Transaction ID: SA11.13939242
City ALBUQUERQUE	State NM	Zip Code 87106-1304
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 316.00	

SUBTOTAL of Receipts This Page (optional)	151.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1630 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM H. NOLAND

Mailing Address 215 AMHERST DR NE

City State Zip Code
ALBUQUERQUE NM 87106-1304

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 316.00

Date of Receipt
MM / DD / YYYY
11 / 22 / 2010

Transaction ID: SA11.13972823

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
FRANK NOLDEN

Mailing Address 303 CHIMNEY ROCK ST.

City State Zip Code
LUFKIN TX 75904-7580

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13940038

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
W. NIVEN NOLL

Mailing Address 4691 WHISPERING PINES LANE

City State Zip Code
LAS CRUCES NM 88007-4527

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13947617

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **625.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1631 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. NORMA J. NOLT	Date of Receipt MM / DD / YYYY 11 / 10 / 2010
	Mailing Address 2271 S MADRONA DRIVE	Transaction ID: SA11.13967651
	City State Zip Code PALM SPRINGS CA 92264-9512	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

B.	Full Name (Last, First, Middle Initial) MR. CHARLES J. NOOE	Date of Receipt MM / DD / YYYY 11 / 16 / 2010
	Mailing Address 607 WASHINGTON ST	Transaction ID: SA11.13969234
	City State Zip Code EDEN NC 27288-6101	Amount of Each Receipt this Period 1.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 271.00	

C.	Full Name (Last, First, Middle Initial) DR. ABRAHAM NOORDERGRAAF	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 620 HAYDOCK LN.	Transaction ID: SA11.13955211
	City State Zip Code HAVERFORD PA 19041-1208	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer U. OF PENNSYLVANIA	Occupation PROFESSOR-BIOPHYSICIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.00	

SUBTOTAL of Receipts This Page (optional)	▶	126.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1632 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ROBERT NORDBY

Mailing Address **1360 N SANDBURG TER. APT. 2108**

City **CHICAGO** State **IL** Zip Code **60610-2040**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **11 / 01 / 2010**

Transaction ID: SA11.13964308

Amount of Each Receipt this Period **50.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CRAIG D. NORDENSON

Mailing Address **2901 OLDE COUNTRY LN.**

City **DUBUQUE** State **IA** Zip Code **52001-1069**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **385.00**

Date of Receipt **10 / 15 / 2010**

Transaction ID: SA11.13931413

Amount of Each Receipt this Period **40.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JANE H. NORDLUND

Mailing Address **1255 GULF SHORE BLVD N**

City **NAPLES** State **FL** Zip Code **34102**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **201.00**

Date of Receipt **10 / 21 / 2010**

Transaction ID: SA11.13946788

Amount of Each Receipt this Period **101.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **191.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1633 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MR. STEVEN L. NOREM</p> <p>Mailing Address 6476 TOWNLINE RD</p> <hr/> <p>City State Zip Code LAKE GENEVA WI 53147-4459</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation SELF-EMPLOYED FARMER</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 255.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 2 7 / 2 0 1 0</td> </tr> </table> </p> <p>Transaction ID: SA11.13955762</p> <p>Amount of Each Receipt this Period 40.00</p> <p>CONTRIBUTION</p>	M M / D D / Y Y Y Y	1 0 / 2 7 / 2 0 1 0
M M / D D / Y Y Y Y			
1 0 / 2 7 / 2 0 1 0			

<p>B. Full Name (Last, First, Middle Initial) MS. JUDITH NOREN</p> <p>Mailing Address 2030 KINSLEY ST. APT. E</p> <hr/> <p>City State Zip Code SANTA CRUZ CA 95062-3027</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 206.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 1 8 / 2 0 1 0</td> </tr> </table> </p> <p>Transaction ID: SA11.13933129</p> <p>Amount of Each Receipt this Period 26.00</p> <p>CONTRIBUTION</p>	M M / D D / Y Y Y Y	1 0 / 1 8 / 2 0 1 0
M M / D D / Y Y Y Y			
1 0 / 1 8 / 2 0 1 0			

<p>C. Full Name (Last, First, Middle Initial) MR. DONALD J. NORES</p> <p>Mailing Address 598 ARBOR STREET</p> <hr/> <p>City State Zip Code PASADENA CA 91105-1536</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1750.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 2 2 / 2 0 1 0</td> </tr> </table> </p> <p>Transaction ID: SA11.13950437</p> <p>Amount of Each Receipt this Period 250.00</p> <p>CONTRIBUTION</p>	M M / D D / Y Y Y Y	1 0 / 2 2 / 2 0 1 0
M M / D D / Y Y Y Y			
1 0 / 2 2 / 2 0 1 0			

SUBTOTAL of Receipts This Page (optional)	316.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1634 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. PALMER NORLING

Mailing Address 2100 4TH AVE SE

City WILLMAR State MN Zip Code 56201-3836

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 26 / 2010

Transaction ID: SA11.13951674

Amount of Each Receipt this Period 100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ROBERT NORLING

Mailing Address 27 SEA TER.

City NEWPORT COAST State CA Zip Code 92657-1021

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 19 / 2010

Transaction ID: SA11.13939301

Amount of Each Receipt this Period 50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOHN F. NORRIS

Mailing Address 145 EAST 81ST STREET APT7B

City NEW YORK State NY Zip Code 10028-1869

FEC ID number of contributing federal political committee. **C**

Name of Employer PIMCO Occupation INVESTMENTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt 10 / 26 / 2010

Transaction ID: SA11.13951494

Amount of Each Receipt this Period 210.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 360.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1635 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. TERRY NORRIS

Mailing Address 502 E BEECH ST

City State Zip Code
SULLIVAN IN 47882-1347

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NORRIS SCALE CO. PRESIDENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2010

Transaction ID: SA11.13965170

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ALAN NORTHRUP

Mailing Address 142 LANCASTER ST.

City State Zip Code
ALBANY NY 12210

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TRANS WORLD ENTERTAINMENT WAREHOUSE WORKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 555.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13929642

Amount of Each Receipt this Period
80.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JAMES C. NORTON

Mailing Address 3020 SOUTH YORKTOWN

City State Zip Code
TULSA OK 74114-5434

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JIM NORTON AUTO DEALERSHIP AUTO DEALER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
10 / 20 / 2010

Transaction ID: SA11.13945241

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2680.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1636 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JAY NORTON

Mailing Address 1414 KENT ST.

City LUBBOCK State TX Zip Code 79403-1405

FEC ID number of contributing federal political committee. **C**

Name of Employer NORTON ENERGY DRILLING Occupation DRILLING CONTRACTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 10 / 29 / 2010
Transaction ID: SA11.13959139
Amount of Each Receipt this Period: 150.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JIM NORVELL

Mailing Address 606 BOURNE PL

City AUGUSTA State GA Zip Code 30904-4358

FEC ID number of contributing federal political committee. **C**

Name of Employer MORGAN KEEGAN Occupation FINANCIAL ADVISOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13934766
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. SANDRA NOTT

Mailing Address 555 HAYMARKET CV

City MEMPHIS State TN Zip Code 38120-3009

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13931657
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 300.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1637 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. DOROTHEA M. NOTTER

Mailing Address 3386 W FAIRWAY DRIVE

City State Zip Code
COEUR D ALENE ID 83815-8071

FEC ID number of contributing federal political committee. C

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
NURSE FARMS INC

Occupation INFORMATION REQUESTED PER BEST EFFORTS
FARMER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 1 0

Transaction ID: SA11.13972182

Amount of Each Receipt this Period
60.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
TIMOTHY M. NOURSE

Mailing Address 41 RIVER RD

City State Zip Code
S DEERFIELD MA 01373-9754

FEC ID number of contributing federal political committee. C

Name of Employer NURSE FARMS INC

Occupation FARMER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946940

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
TIMOTHY M. NOURSE

Mailing Address 41 RIVER RD

City State Zip Code
S DEERFIELD MA 01373-9754

FEC ID number of contributing federal political committee. C

Name of Employer NURSE FARMS INC

Occupation FARMER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949287

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 460.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1639 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. NORMAN M. NULL	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 7 WARSEN AVE	Transaction ID: SA11.13934290
	City State Zip Code WENTZVILLE MO 63385-4812	Amount of Each Receipt this Period 26.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.00	

B.	Full Name (Last, First, Middle Initial) LOIS J. NURRITO	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 115 DIAMOND SKY DR	Transaction ID: SA11.13932674
	City State Zip Code SEDONA AZ 86351-7448	Amount of Each Receipt this Period 16.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.00	

C.	Full Name (Last, First, Middle Initial) MRS. BONNIE J. NUTT	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 9477 BARROW CT.	Transaction ID: SA11.13934007
	City State Zip Code COLLEGE STA TX 77845-3765	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation HOMEMAKER HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	142.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1640 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. ALBERTA G. NYCE

Mailing Address 3228 107TH ST SE

City State Zip Code
EVERETT WA 98208-4534

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13964432

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. LLOYD G. NYGAARD

Mailing Address P.O. BOX 135

City State Zip Code
COLUMBUS ND 58727-0135

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 8 / 2 0 1 0

Transaction ID: SA11.13966817

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. GLORIA A. NYHEIM

Mailing Address 116 MAIN STREET
P.O. BOX 543 APARTMENT 223

City State Zip Code
GRANTSVILLE MD 21536-1260

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 491.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13931085

Amount of Each Receipt this Period

36.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

196.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1641 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. GLORIA A. NYHEIM

Mailing Address 116 MAIN STREET
P.O. BOX 543 APARTMENT 223

City State Zip Code
GRANTSVILLE MD 21536-1260

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 491.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13952484
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT ELMER NYSTROM

Mailing Address 887 SYCAMORE LN.

City State Zip Code
LANCASTER TX 75146-1449

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 11 / 16 / 2010
Transaction ID: SA11.13969287
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BILL O' CONNOR

Mailing Address 177 BLACK RIVER RD

City State Zip Code
STEPHENTOWN NY 12169-2004

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 17 / 2010
Transaction ID: SA11.13928747
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 200.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1642 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. JOHN L. O'CONNOR	Date of Receipt MM / DD / YYYY 11 / 04 / 2010
	Mailing Address 708 PEAKE'S POINT DRIVE	Transaction ID: SA11.13965639
	City State Zip Code GULF BREEZE FL 32561-4127	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00

B.	Full Name (Last, First, Middle Initial) MR. CECIL O'BRATE	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address P.O. BOX 399	Transaction ID: SA11.13941881
	City State Zip Code GARDEN CITY KS 67846-0399	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer Occupation PALMER MFG. & TANK INC. PRESIDENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00

C.	Full Name (Last, First, Middle Initial) DR. ROBERT O'BRYAN	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 44450 THOMAS COURT	Transaction ID: SA11.13951480
	City State Zip Code BEAUMONT TX 77706	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer Occupation ANESTHESIA ASSOCIATES PHYSICIAN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1643 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
TOMMIE G. O'DONOGHUE

Mailing Address **18345 DEEP FOREST AVE**

City **BATON ROUGE** State **LA** Zip Code **70817-8924**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FLOWER PRODUCTS** Occupation **MANAGER/SALESMEN**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 19 / 2010**

Transaction ID: SA11.13941849

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RICHARD C. O'FERRALL, JR.

Mailing Address **P.O. BOX 297**

City **MENTONE** State **AL** Zip Code **35984-0297**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **CAMP DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **11 / 01 / 2010**

Transaction ID: SA11.13960769

Amount of Each Receipt this Period **160.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. DUANE O'HARA

Mailing Address **9110 TIFFANY DR**

City **CUTLER BAY** State **FL** Zip Code **33157-7938**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **355.00**

Date of Receipt **10 / 29 / 2010**

Transaction ID: SA11.13959171

Amount of Each Receipt this Period **40.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **300.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1644 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. PATRICIA O'NEAL

Mailing Address PO BOX 4660

City

FORT WORTH

State

TX

Zip Code

76164-0660

FEC ID number of contributing federal political committee.

C

Name of Employer
O'NEAL DRILLING CO.

Occupation
OWNER

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
10 / 29 / 2010

Transaction ID: SA11.13959415

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

M CHARLES O'REILLY

Mailing Address 5200 SEASCAPE LANE

City

PLANO

State

TX

Zip Code

75093-4010

FEC ID number of contributing federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
11 / 04 / 2010

Transaction ID: SA11.13965569

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

CHARLIE O'ROURKE

Mailing Address 2 BEACON HILL LANE

City

GREENWOOD VILLAGE

State

CO

Zip Code

80111-5239

FEC ID number of contributing federal political committee.

C

Name of Employer
CORE VENTURES

Occupation
BUSINESS AND TECHNOLOGY CONSULTANT

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
10 / 14 / 2010

Transaction ID: SA11.13918872

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1050.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1645 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. GREGORY O'SHAUGHNESSY		Date of Receipt MM / DD / YYYY 11 / 10 / 2010		
	Mailing Address 401 9TH STREET, NW SUITE 900		Transaction ID: SA11.13968706		
	City WASHINGTON	State DC	Zip Code 20004-2145	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
	Name of Employer NIXON & PEABODY	Occupation ATTORNEY	Aggregate Year-to-Date 250.00		

B.	Full Name (Last, First, Middle Initial) MR. RUSSELL A. OASIS		Date of Receipt MM / DD / YYYY 10 / 22 / 2010		
	Mailing Address 1172 SOUTH DIXIE HIGHWAY #413		Transaction ID: SA11.13951152		
	City CORAL GABLES	State FL	Zip Code 33146-2918	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
	Name of Employer OASIS GROUP	Occupation RADIO BROADCASTING	Aggregate Year-to-Date 6000.00		

C.	Full Name (Last, First, Middle Initial) MRS. YVONNE B. OBENCHAIN		Date of Receipt MM / DD / YYYY 10 / 14 / 2010		
	Mailing Address 4677 S VERSAILLES AVE		Transaction ID: SA11.13930267		
	City DALLAS	State TX	Zip Code 75209-6017	Amount of Each Receipt this Period 121.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	Aggregate Year-to-Date 281.00		

SUBTOTAL of Receipts This Page (optional)	▶	1371.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1646 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. VICTOR L. OBERHAU
Mailing Address 125 ANDOVER PL
City DANVILLE State VA Zip Code 24541-5201
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 301.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13935674
Amount of Each Receipt this Period 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. VICTOR L. OBERHAU
Mailing Address 125 ANDOVER PL
City DANVILLE State VA Zip Code 24541-5201
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 301.00
Date of Receipt 11 / 01 / 2010
Transaction ID: SA11.13963374
Amount of Each Receipt this Period 1.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MAUREEN OBRIEN
Mailing Address 38 CAVENDISH CIR.
City SALEM State MA Zip Code 01970-6853
FEC ID number of contributing federal political committee. **C**
Name of Employer UNEMPLOYED Occupation UNEMPLOYED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13939222
Amount of Each Receipt this Period 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 151.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1647 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. SHIRLEY A. OBRYAN

Mailing Address 22721 320TH. ST.

City State Zip Code
BAGLEY MN 56621-4145

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2010

Transaction ID: SA11.13964987

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PAUL OBST

Mailing Address 1520 N ALAMO RD

City State Zip Code
ALAMO TX 78516-6817

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13936541

Amount of Each Receipt this Period
1.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ALVIN G. OCHS

Mailing Address 7716 S MCMARTIN AVE

City State Zip Code
SIOUX FALLS SD 57108-6205

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13946260

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **91.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1648 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
CYNTHIA R. OCONNOR

Mailing Address 1222 STUART ROBESON DR

City State Zip Code
MC LEAN VA 22101-2967

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EJF CAPITAL LLC ASSET MANAGER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940600

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JOSEPH W. ODELL

Mailing Address 19365 CYPRESS RIDGE TER
UNIT 407

City State Zip Code
LEESBURG VA 20176-8433

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 290.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938678

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
RAY P. ODEN, JR.

Mailing Address 702 THORA BLVD.

City State Zip Code
SHREVEPORT LA 71106-1824

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 6000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956722

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5225.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1649 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RAY P. ODEN, JR.
Mailing Address 702 THORA BLVD

City State Zip Code
SHREVEPORT LA 71106-1824

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 16500.00

Date of Receipt: 11 / 22 / 2010
Transaction ID: SA11.13973013
Amount of Each Receipt this Period: 5000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. TAL ODEN
Mailing Address 11809 CENTURY DR

City State Zip Code
OKLAHOMA CITY OK 73162-1131

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
OKLA OUTREACH FOUNDATION EDUCATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13931897
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JAMES A. ODOM, JR.
Mailing Address 1411 WANDA LN.

City State Zip Code
HARRISBURG PA 17109-5543

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13944745
Amount of Each Receipt this Period: 220.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 5270.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1650 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. SHIRLEY A. OECHSLER

Mailing Address 538 OAKMONT DR

City State Zip Code
ORANGE PARK FL 32073-1705

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 267.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935269

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. LYNDA P. OGDEN

Mailing Address 8 RIVER LN

City State Zip Code
SACO ME 04072-3036

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942584

Amount of Each Receipt this Period
30.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ROBERT S. OGDEN

Mailing Address 5411 OSPREY CT

City State Zip Code
SANIBEL FL 33957-2319

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946726

Amount of Each Receipt this Period
101.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **181.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1651 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
WALKER H. OGDEN

Mailing Address P.O. BOX 4450

City State Zip Code
PINEVILLE LA 71361-4450

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WILLAMETTE VALLEY CO UP WILLIAM HE VALLEY CO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 221.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932929

Amount of Each Receipt this Period
61.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. DORIS G. OGLESBY

Mailing Address 7412 AVALON DRIVE

City State Zip Code
FORT WAYNE IN 46819-1709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943884

Amount of Each Receipt this Period
51.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. THOMAS J. OGORCHOCK

Mailing Address 13930 SHELTER MANOR DR

City State Zip Code
HAYMARKET VA 20169-2447

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DSG MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959844

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **162.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1652 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. LISELETTE OHLIG		Date of Receipt
	Mailing Address 401 MORNING STAR LN		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 1 4 / 2 0 1 0
	City	State	Zip Code
	NEWPORT BEACH	CA	92660-5712
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: SA11.13918658
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 255.00	CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) DAN OJA		Date of Receipt
	Mailing Address P.M.B. 146		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 2 / 2 0 1 0
	City	State	Zip Code
	ST. THOMAS	VI	00802
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: SA11.13945584
Name of Employer SELF-EMPLOYED		Occupation PROGRAMMER/AUTHOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00
		<input type="text"/> 500.00	CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MR. STEPHEN OJENA		Date of Receipt
	Mailing Address 1182 SANTA LUCIA DR.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 1 9 / 2 0 1 0
	City	State	Zip Code
	PITTSBURG	CA	94565-7615
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: SA11.13939999
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 75.00
		<input type="text"/> 225.00	CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 625.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1653 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DR. RICHARD OLAUGHLIN		Date of Receipt
	Mailing Address 45 CYPRESS LN		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	WEST CREEK	NJ	08092-2839
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13928861
		Amount of Each Receipt this Period	
		<input type="text" value="300.00"/>	
Name of Employer AMI		Occupation PHYSICIAN	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="2950.00"/>	

B.	Full Name (Last, First, Middle Initial) DR. RICHARD OLAUGHLIN		Date of Receipt
	Mailing Address 45 CYPRESS LN		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	WEST CREEK	NJ	08092-2839
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13931481
		Amount of Each Receipt this Period	
		<input type="text" value="750.00"/>	
Name of Employer AMI		Occupation PHYSICIAN	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="2950.00"/>	

C.	Full Name (Last, First, Middle Initial) MICHAEL C. OLCOTT		Date of Receipt
	Mailing Address P.O. BOX 330427		<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	ARGYLE	TX	76226
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13965561
		Amount of Each Receipt this Period	
		<input type="text" value="500.00"/>	
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1550.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1654 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ROBERT OLEARY	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 691 WEST CONWAY DRIVE	Transaction ID: SA11.13957904
	City ATLANTA State GA Zip Code 30327-3631	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED Occupation RETIRED	Aggregate Year-to-Date 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.	Full Name (Last, First, Middle Initial) ROBERT C. OLEARY	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 691 W CONWAY DR. NW	Transaction ID: SA11.13944668
	City ATLANTA State GA Zip Code 30327-3631	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS	Aggregate Year-to-Date 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.	Full Name (Last, First, Middle Initial) THOMAS M. OLEARY	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 415 N SHEPHERD HILL LN.	Transaction ID: SA11.13940441
	City MCHENRY State IL Zip Code 60050-6111	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer PEPPER CONSTRUCTION GROUP Occupation ATTORNEY/CORPORATE OFFICER	Aggregate Year-to-Date 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	1350.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1655 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. JOYCE OLMSTEAD

Mailing Address 3000 UPPER RIVER ROAD

City State Zip Code
GOLD HILL OR 97525-9725

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946341

Amount of Each Receipt this Period

20.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. BILL OLSON

Mailing Address 32 14TH STREET, NE

City State Zip Code
WASHINGTON DC 20002-8437

FEC ID number of contributing federal political committee. **C**

Name of Employer
BIO

Occupation
DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959393

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. GEORGE W. OLSON

Mailing Address 5206 W 80TH TERRACE

City State Zip Code
PRAIRIE VILLAGE KS 66208-4913

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942915

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

270.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1656 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
GERALD G. OLSON

Mailing Address 79035 VIA CORTA

City State Zip Code
LA QUINTA CA 92253-6309

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941179

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DR. JOSEPH P. OLSON

Mailing Address 507 HOFFMAN ST

City State Zip Code
ATHENS AL 35611-2755

FEC ID number of contributing federal political committee. **C**

Name of Employer
ATHENS BIBLE SCHOOL

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
PRESIDENT

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Transaction ID: SA11.13967702

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. R . CRAIG OLSON

Mailing Address 6306 HUNTOVER LANE

City State Zip Code
NORTH BETHESDA MD 20852-3672

FEC ID number of contributing federal political committee. **C**

Name of Employer
OARI

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
PUBLISHER

Aggregate Year-to-Date ▼
670.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951429

Amount of Each Receipt this Period

210.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

710.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1657 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT J. OLSON

Mailing Address 4249 COUNTY RD 309A

City State Zip Code
IGNACIO CO 81137-9134

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 501.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13941305

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT J. OLSON

Mailing Address 4249 COUNTY RD 309A

City State Zip Code
IGNACIO CO 81137-9134

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 501.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13941422

Amount of Each Receipt this Period
1.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. SANDRA M. OLSSON

Mailing Address 9023 HUNTERS WAY

City State Zip Code
LITTLETON CO 80129-1505

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13942539

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 301.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1658 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
RUSS OMARA

Mailing Address 530 SUNNYCOVE HEIGHTS RD.

City State Zip Code
WICKENBURG AZ 85390-2310

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
201.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952532

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. STORMIE OMARTIAN

Mailing Address 1053 VAUGHN CREST DRIVE

City State Zip Code
FRANKLIN TN 37069-7212

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

WRITER

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13961206

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
LINDA ONDRIEZEK

Mailing Address 2400 ROCKY POINT RD.

City State Zip Code
MALABAR FL 32950-4509

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918710

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

200.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1659 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
THOMAS ONEAL

Mailing Address 4177 HWY. 38 S

City BLENHEIM State SC Zip Code 29516-6535

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13949723
 Amount of Each Receipt this Period: 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PAUL W. ONESTI

Mailing Address S9385 VON WALD ROAD

City PRAIRIE DU SAC State WI Zip Code 53578-9780

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 11 / 08 / 2010
Transaction ID: SA11.13966917
 Amount of Each Receipt this Period: 35.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WAYNE OPLAND

Mailing Address 6318 RIVER PLACE BLVD

City AUSTIN State TX Zip Code 78730-1133

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13948184
 Amount of Each Receipt this Period: 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 185.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1660 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. EDWARD BELZ OPPERMANN	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 2151 GREEN OAKS RD. APT. 4400 APARTMENT 4400	Transaction ID: SA11.13930281
	City State Zip Code FORT WORTH TX 76116-1748	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) FATEMEH M. ORANDI	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 3732 W HURLEY CT.	Transaction ID: SA11.13954246
	City State Zip Code VISALIA CA 93291-4161	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 201.00	

C.	Full Name (Last, First, Middle Initial) MR. JOSEPH B. ORGAN, JR.	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 1213 PARK AVENUE	Transaction ID: SA11.13945300
	City State Zip Code RIVER FOREST IL 60305-1019	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer MAYER BROWN Occupation LAWYER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 17500.00	

SUBTOTAL of Receipts This Page (optional)	575.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1661 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MR. JOSEPH B. ORGAN, JR.</p> <p>Mailing Address 1213 PARK AVENUE</p> <p>City State Zip Code RIVER FOREST IL 60305-1019</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation MAYER BROWN LAWYER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 17500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 1 0</p> <p>Transaction ID: SA11.13955660</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>CONTRIBUTION</p>
--	--

<p>B. Full Name (Last, First, Middle Initial) MR. JOSEPH B. ORGAN, JR.</p> <p>Mailing Address 1213 PARK AVENUE</p> <p>City State Zip Code RIVER FOREST IL 60305-1019</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation MAYER BROWN LAWYER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 17500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 1 0</p> <p>Transaction ID: SA11.13957634</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>CONTRIBUTION</p>
--	--

<p>C. Full Name (Last, First, Middle Initial) MR. JOSEPH B. ORGAN, JR.</p> <p>Mailing Address 1213 PARK AVENUE</p> <p>City State Zip Code RIVER FOREST IL 60305-1019</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation MAYER BROWN LAWYER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 17500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 1 0</p> <p>Transaction ID: SA11.13960660</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>CONTRIBUTION</p>
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SUBTOTAL of Receipts This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1662 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOSEPH B. ORGAN, JR.
Mailing Address 1213 PARK AVENUE
City RIVER FOREST State IL Zip Code 60305-1019
FEC ID number of contributing federal political committee. **C**
Name of Employer MAYER BROWN Occupation LAWYER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 17500.00
Date of Receipt 11 / 04 / 2010
Transaction ID: SA11.13965475
Amount of Each Receipt this Period 1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. ROSLYN ORLIN
Mailing Address 2 WINDSOR DR
City OLD WESTBURY State NY Zip Code 11568-1529
FEC ID number of contributing federal political committee. **C**
Name of Employer HOMEMAKER Occupation HOMEMAKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 620.00
Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13931633
Amount of Each Receipt this Period 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CURTIS B. ORLOFF
Mailing Address 1121 CAMELLIA BLVD.
UNIT 301
City LAFAYETTE State LA Zip Code 70508-6053
FEC ID number of contributing federal political committee. **C**
Name of Employer HALIBURTON Occupation ENGINEER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 245.00
Date of Receipt 11 / 01 / 2010
Transaction ID: SA11.13960802
Amount of Each Receipt this Period 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1150.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1663 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MICHEL J. ORRADRE

Mailing Address 67100 SARGENT CANYON ROAD

City State Zip Code
SAN ARDO CA 93450

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED RANCHER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13947127

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DONALD ORRISON

Mailing Address 2803 GRANDVIEW DR

City State Zip Code
MIDDLETOWN MD 21769-8120

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FOOD PRO CORP SALES CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13939464

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOE M. ORTIVEZ

Mailing Address 6049 J D JOHNSON RD.

City State Zip Code
PEYTON CO 80831-7301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CSC PLUMBER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
MM / DD / YYYY
10 / 27 / 2010

Transaction ID: SA11.13958269

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 190.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1664 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. ARTURO R. ORTIZ	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 6416 SILVER MESA DRIVE UNIT C	Transaction ID: SA11.13943387
	City LITTLETON State CO Zip Code 80130-3054	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer DEPT. OF DEFENSE Occupation ENGINEER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 280.00	

B.	Full Name (Last, First, Middle Initial) MRS. MARYGINA ORTIZ	Date of Receipt MM / DD / YYYY 10 / 29 / 2010
	Mailing Address 188 STEADWELL RD	Transaction ID: SA11.13959105
	City AMSTERDAM State NY Zip Code 12010-7507	Amount of Each Receipt this Period 110.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 317.00	

C.	Full Name (Last, First, Middle Initial) DR. HAX ORUP	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address PO BOX 35584	Transaction ID: SA11.13928074
	City LOS GATOS State CA Zip Code 95030-0584	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer SELF-EMPLOYED Occupation DOCTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional)	250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1665 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. JOAN D. OSBORNE

Mailing Address 128 KAAPUNI DRIVE

City State Zip Code
KAILUA HI 96734-2324

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956238

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DAVID L. OSMENT

Mailing Address 1350 NOBLE HERON WAY

City State Zip Code
NAPLES FL 34105-2791

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918878

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. RICHARD C. OSTRUP

Mailing Address 2100 5TH AVE STE 200

City State Zip Code
SAN DIEGO CA 92101

FEC ID number of contributing federal political committee. **C**

Name of Employer NEUROSURGICAL MEDICAL CLINIC, INC.
Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3250.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962553

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **650.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1666 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. LOUIS D. OSWALD

Mailing Address 1005 W 10 RD

City State Zip Code
AURORA NE 68818-4303

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt
MM / DD / YYYY
10 / 27 / 2010

Transaction ID: SA11.13958669

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WESLEY OTIS

Mailing Address 388 HORACE MILLS RD

City State Zip Code
SANFORD ME 04073-4432

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13949690

Amount of Each Receipt this Period
15.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. ARDITH OTT

Mailing Address 1226 N SHEFFORD ST

City State Zip Code
WICHITA KS 67212-5667

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13935677

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **115.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1667 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DOYLE OTTARSON

Mailing Address 11862 ALPINE DR SW

City State Zip Code
PORT ORCHARD WA 98367-9264

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930649

Amount of Each Receipt this Period
75.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. JOAN OTTAVIO

Mailing Address 1821 SAN FRANCISCO

City State Zip Code
SAN ANTONIO TX 78201-4339

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 477.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931670

Amount of Each Receipt this Period
75.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RICHARD C. OTTO

Mailing Address 7903 GRENOBLE LANE

City State Zip Code
PROSPECT KY 40059-8415

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933948

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 200.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1668 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. WM A. OUGHTERSON

Mailing Address 1701 SW CAPRI ST APT 112
APT 112

City State Zip Code
PALM CITY FL 34990-4536

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 1 0

Transaction ID: SA11.13965597

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JAMES T. OVERSTREET

Mailing Address 1437 E 332ND ST

City State Zip Code
EASTLAKE OH 44095-3461

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 235.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 1 0

Transaction ID: SA11.13966872

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. WILLIAM C. OVERSTREET

Mailing Address 250 E ALAMEDA APT 818
APT. 818

City State Zip Code
SANTA FE NM 87501-6209

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 290.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13947102

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

400.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1669 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. RITA OVERTON

Mailing Address 12901 CATALINA ST.

City State Zip Code
LEAWOOD KS 66209-2390

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
FINANCIAL PROFESSIONALS OFFICE MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt M M / D D / Y Y Y Y
10 / 25 / 2010

Transaction ID: SA11.13953036

Amount of Each Receipt this Period 200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. OLE OVSTEGARD

Mailing Address 4424 SIMSBURY RD
APT J

City State Zip Code
CHARLOTTE NC 28226-4012

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt M M / D D / Y Y Y Y
10 / 28 / 2010

Transaction ID: SA11.13960164

Amount of Each Receipt this Period 100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BONITA OWEN

Mailing Address 104 STUART DR.

City State Zip Code
HENDERSONVILLE TN 37075-4318

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt M M / D D / Y Y Y Y
10 / 20 / 2010

Transaction ID: SA11.13938587

Amount of Each Receipt this Period 25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 325.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1670 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. SUE C. OWEN

Mailing Address 135 COUNTY ROAD 3170

City State Zip Code
DECATUR TX 76234-4832

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SUE FARMER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13971645

Amount of Each Receipt this Period

60.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JAMES W. OWENS

Mailing Address 2701 NORTH WEST 59TH STREET

City State Zip Code
OKLAHOMA CITY OK 73112-7025

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PETROLEUM ENGINEER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13945240

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JOHN F. OWENS

Mailing Address 19375 CYPRESS RIDGE TER UNIT 6

City State Zip Code
LEESBURG VA 20176

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 377.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 7 / 2 0 1 0

Transaction ID: SA11.13969887

Amount of Each Receipt this Period

65.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1671 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DR. JAMES L. OWNBEY

Mailing Address 3615 19TH ST

City State Zip Code
LUBBOCK TX 79410-1203

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER BEST EFFORTS

Occupation
PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928936

Amount of Each Receipt this Period
300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. STEPHEN OXLEY

Mailing Address 5100 WESTHEIMER ROAD
SUITE 390

City State Zip Code
HOUSTON TX 77056-5598

FEC ID number of contributing federal political committee. **C**

Name of Employer
HIGHLAND OIL AND GAS

Occupation
CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13928415

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ISTVAN OZSVATH

Mailing Address 414 FALL CREEK DR

City State Zip Code
RICHARDSON TX 75080-2507

FEC ID number of contributing federal political committee. **C**

Name of Employer
UTD

Occupation
PROFESSOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
241.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941478

Amount of Each Receipt this Period
11.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **2811.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1672 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. ELIZABETH G. PACAUD

Mailing Address 5501 TIMMONS AVE

City State Zip Code
MEMPHIS TN 38119-6971

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
405.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13948113

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
LAWRENCE T. PACE

Mailing Address 2730 CHESTERTON RD

City State Zip Code
SHAKER HEIGHTS OH 44122-1805

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
550.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959088

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. MAX A. PACHAR, SR.

Mailing Address 2516 COUNTRY CLUB DRIVE

City State Zip Code
ORANGE TX 77630-2139

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
310.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953142

Amount of Each Receipt this Period
150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

400.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1673 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DONALD H. PACKARD

Mailing Address 1628 AMHURST WAY

City State Zip Code
BOURBONNAIS IL 60914-9768

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940462

Amount of Each Receipt this Period
20.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DONALD H. PACKARD

Mailing Address 1628 AMHURST WAY

City State Zip Code
BOURBONNAIS IL 60914-9768

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944995

Amount of Each Receipt this Period
20.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. BERNICE PADILLA

Mailing Address 515 N BROADMOOR AVE

City State Zip Code
WICHITA KS 67206-1601

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1005.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937117

Amount of Each Receipt this Period
105.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 145.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1674 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. BERNICE PADILLA	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 515 N BROADMOOR AVE	Transaction ID: SA11.13953320
	City State Zip Code WICHITA KS 67206-1601	Amount of Each Receipt this Period 105.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1005.00	

B.	Full Name (Last, First, Middle Initial) MRS. ANNETTA C. PAGE	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 800 WOODLANE ST	Transaction ID: SA11.13948858
	City State Zip Code PARAGOULD AR 72450-4837	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

C.	Full Name (Last, First, Middle Initial) C O. PAGE	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 2027 254TH. ST. NW	Transaction ID: SA11.13939064
	City State Zip Code STANWOOD WA 98292-9280	Amount of Each Receipt this Period 1.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00	

SUBTOTAL of Receipts This Page (optional)	406.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1675 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. DANIEL B. PAGE		Date of Receipt
	Mailing Address 3107 JUNEGRASS CT		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	HUMBLE	TX	77345-5431
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer CONTINENTAL AIRLINES		Occupation AIRLINE PILOT	Transaction ID: SA11.13955873
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="225.00"/>	<input type="text" value="125.00"/>
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MR. JASON PAGE		Date of Receipt
	Mailing Address 1534 FAIRVIEW ST		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	HOUSTON	TX	77006-1814
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer AMEREX ENERGY		Occupation FREIGHTER	Transaction ID: SA11.13959320
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="500.00"/>	<input type="text" value="500.00"/>
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MAXINE PAGE		Date of Receipt
	Mailing Address 6244 INDIAN PATH		<input type="text" value="11"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	SAN ANGELO	TX	76901-4914
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer RETIRED		Occupation RETIRED	Transaction ID: SA11.13969512
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="300.00"/>	<input type="text" value="100.00"/>
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="725.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1676 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT M. PAGE

Mailing Address 246 LOCKA DR.

City State Zip Code
JUPITER FL 33458-7733

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation CONSULTANT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13936289

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. MARJORIE SUZANNE PAINE

Mailing Address 912 N CHAUNCEY AVENUE

City State Zip Code
WEST LAFAYETTE IN 47906-2706

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PRIVATE VOICE TEACHER/CHOREOGRAPHER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	1	0

Transaction ID: SA11.13955801

Amount of Each Receipt this Period
45.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JAMES L. PAISLEY

Mailing Address 11937 KIOWA AVE APT. 7

City State Zip Code
LOS ANGELES CA 90049-7004

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13935518

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **245.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1677 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial) MR. ERIC PALEY		Date of Receipt MM / DD / YYYY 11 / 10 / 2010
Mailing Address 401 9TH STREET, NW SUITE 900		Transaction ID: SA11.13968684
City WASHINGTON	State DC	Zip Code 20004-2145
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 589.00
Name of Employer NIXON & PEABODY	Occupation ATTORNEY	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 589.00	

B.

Full Name (Last, First, Middle Initial) MR. LESLIE T. PALLONE		Date of Receipt MM / DD / YYYY 10 / 18 / 2010
Mailing Address 655 BRADYS RIDGE RD		Transaction ID: SA11.13934829
City BEAVER	State PA	Zip Code 15009-9213
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

C.

Full Name (Last, First, Middle Initial) MR. RUDOLPH E. PALLUCK		Date of Receipt MM / DD / YYYY 10 / 25 / 2010
Mailing Address 13968 EATON DR.		Transaction ID: SA11.13954419
City PLYMOUTH	State MI	Zip Code 48170-2402
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional)	764.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1678 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JACK PALMER

Mailing Address P.O. BOX 376

City

LAKESIDE

State

MT

Zip Code

59922-0376

FEC ID number of contributing federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956582

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. LINDA J. PALMER

Mailing Address 4800 WHISPERING PINE WAY

City

NAPLES

State

FL

Zip Code

34103-2408

FEC ID number of contributing federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

876.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961603

Amount of Each Receipt this Period

251.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. MILDRED PALMER

Mailing Address 207 SIR ARTHUR CT

City

SAN ANTONIO

State

TX

Zip Code

78213-2632

FEC ID number of contributing federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 5 / 2 0 1 0

Transaction ID: SA11.13967884

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

651.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1679 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. NEIL H. PALMER

Mailing Address 890 ELM GROVE RD STE 100

City State Zip Code
ELM GROVE WI 53122

FEC ID number of contributing federal political committee. **C**

Name of Employer
NEIL PALMER 7 ASSOCIATES, LLC

Occupation
CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13947840

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. JOAN PALMOWSKI

Mailing Address 2733 W LAKE RD

City State Zip Code
CAZENOVIA NY 13035-9823

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
291.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936741

Amount of Each Receipt this Period

1.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. FELICITY PANAS

Mailing Address 199 MILLERTON RD

City State Zip Code
LAKEVILLE CT 06039-1429

FEC ID number of contributing federal political committee. **C**

Name of Employer
GEROLD PANAS LINZEY PARTN

Occupation
FUNDRAISER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928880

Amount of Each Receipt this Period

75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

126.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1680 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DR. CHARLES W. PANCHARI		Date of Receipt
	Mailing Address 2641 EDEN PL		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	BEVERLY HILLS	CA	90210-1306
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GLENVIEW PATH GRP		Occupation PATHOLOGIST	Transaction ID: SA11.13935519
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="336.00"/>	<input type="text" value="100.00"/>
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) MR. STEVEN PANIAN		Date of Receipt
	Mailing Address 99 LUPINE WAY		<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	GOLDEN	CO	80401-5023
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer KEISER		Occupation PHYSICIAN	Transaction ID: SA11.13949748
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="100.00"/>
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) MR. THURL P. PANKEY		Date of Receipt
	Mailing Address 2276 MACKENZIE WAY		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	YUBA CITY	CA	95991-8330
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13931904
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="565.00"/>	<input type="text" value="80.00"/>
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="280.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1681 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
S.J. PANNUTY

Mailing Address 259 CHESWICK DRIVE

City State Zip Code
MARTINSBURG WV 25403-7525

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
201.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948681

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ANDREW PANOS

Mailing Address 28 BIRCH ST

City State Zip Code
DERRY NH 03038

FEC ID number of contributing federal political committee. **C**

Name of Employer
PANO & PANOS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931555

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. JUDY PANTON

Mailing Address 15942 AVENIDA CALMA

City State Zip Code
RANCHO SANTA FE CA 92091-4154

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 8 / 2 0 1 0

Transaction ID: SA11.13966821

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

360.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1682 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. VICTOR W. PAOUNOFF	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address NEW SWEDEN ROAD	Transaction ID: SA11.13938384
	City State Zip Code WOODSTOCK CT 06281	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	

B.	Full Name (Last, First, Middle Initial) MR. ERIC J. PAPALINI	Date of Receipt MM / DD / YYYY 10 / 29 / 2010
	Mailing Address 7575 DR. PHILLIPS BLVD. STE. 390	Transaction ID: SA11.13959050
	City State Zip Code ORLANDO FL 32819-7260	Amount of Each Receipt this Period 110.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RESOURCE MORTGAGE CORPORATION PARTNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 370.00	

C.	Full Name (Last, First, Middle Initial) MR. FRANK A. PAPALE, JR.	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 26 GALE ROAD	Transaction ID: SA11.13953223
	City State Zip Code HAMPTON NH 03842-1013	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional)	▶	210.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1683 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. FORREST PAPE

Mailing Address 4414 TOLEDO BEND DR

City State Zip Code
RICHMOND TX 77406-7949

FEC ID number of contributing federal political committee. **C**

Name of Employer MUSTANG ENGINEERS AND CONSTRUCTORS LP
Occupation PROJECT MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
725.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951443

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. RAQUEL C. PAREDES

Mailing Address P.O. BOX 428

City State Zip Code
POUGHQUAG NY 12570-0428

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
580.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955921

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JOSEPH F. PARELLA, JR.

Mailing Address 12 BRYAN AVENUE

City State Zip Code
MALVERN PA 19355-3076

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13971195

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **250.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1684 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. GUY K. L. PARIS

Mailing Address 11 DRIFTWOOD ROAD

City State Zip Code
MARBLEHEAD MA 01945-1250

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934066

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. BRYAN M. PARK

Mailing Address 13906 SW 216TH ST

City State Zip Code
VASHON WA 98070-6335

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PACIFIC NORTHERN CONSTRUCTION COMPANY, I HOUSING DEVELOPMENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955013

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
CHANG S. PARK

Mailing Address 200 OLD PALISADE RD. APT. 1E

City State Zip Code
FORT LEE NJ 07024-7057

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948611

Amount of Each Receipt this Period

90.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1190.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1685 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. NORBERT H. PARK

Mailing Address 2014 SKYLINE DR.

City State Zip Code
MARSHALLTOWN IA 50158-5135

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13973178

Amount of Each Receipt this Period

45.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JOHN C. PARKER, JR.

Mailing Address P.O. BOX 357

City State Zip Code
PATRICK SC 29584-0357

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 504.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934834

Amount of Each Receipt this Period

102.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
JUDY PARKER

Mailing Address 200 N PICKETT ST. APT. 1102

City State Zip Code
ALEXANDRIA VA 22304-2118

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958393

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

297.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1686 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) PAUL PARKER		Date of Receipt
	Mailing Address 8862 ARCDIA AVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 0 1 / 2 0 1 0
	City	State	Zip Code
	SAN GABRIEL	CA	91775-1204
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13963932
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MR. GEORGE K. PARKMAN		Date of Receipt
	Mailing Address P.O. BOX 2029		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 8 / 2 0 1 0
	City	State	Zip Code
	RUSTON	LA	71273-2029
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13935056
Name of Employer ARKLA TAYLOR INC		Occupation PRESIDENT	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 200.00
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MR. JAMES L. PARKS		Date of Receipt
	Mailing Address P.O. BOX 30240		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 8 / 2 0 1 0
	City	State	Zip Code
	EDMOND	OK	73003-0004
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13934633
Name of Employer SELF-EMPLOYED		Occupation OIL AND GAS EXPLORATIONS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 563.00
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 813.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1687 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JAMES L. PARKS

Mailing Address P.O. BOX 30240

City State Zip Code
EDMOND OK 73003-0004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED OIL AND GAS EXPLORATIONS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 654.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936600

Amount of Each Receipt this Period

1.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
NELLE PARKS

Mailing Address 886 MERRYHILL RANCH RD.

City State Zip Code
SENATOBIA MS 38668-6444

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941441

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
NELLE PARKS

Mailing Address 886 MERRYHILL RANCH RD.

City State Zip Code
SENATOBIA MS 38668-6444

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955808

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

151.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1688 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. EDUARDO PARRA

Mailing Address 2512 ARTESIA BLVD
STE 310A

City State Zip Code
REDONDO BEACH CA 90278-3269

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SOUTH BAY COMPANIES GROUP PRESIDENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13964649

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. CHARLES R. PARROTT

Mailing Address 31 HOSMER ROAD

City State Zip Code
CONCORD MA 01742-2234

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED ATTORNEY

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951375

Amount of Each Receipt this Period
75.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. F. D. PARROTT

Mailing Address 42 W MONTGOMERY XRD.

City State Zip Code
SAVANNAH GA 31406

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
THE PARRATT REALTOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962583

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

775.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1689 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ERIC F. PARSONS

Mailing Address 1203 W 4TH STREET APT 635

City State Zip Code
TAHLEQUAH OK 74464-5021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 470.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946558

Amount of Each Receipt this Period

20.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ERIC F. PARSONS

Mailing Address 1203 W 4TH STREET APT 635

City State Zip Code
TAHLEQUAH OK 74464-5021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 470.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958487

Amount of Each Receipt this Period

10.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ERIC F. PARSONS

Mailing Address 1203 W 4TH STREET APT 635

City State Zip Code
TAHLEQUAH OK 74464-5021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 470.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13964140

Amount of Each Receipt this Period

20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

50.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1690 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. ERIC F. PARSONS		Date of Receipt
	Mailing Address 1203 W 4TH STREET APT 635		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 2 2 / 2 0 1 0
	City	State	Zip Code
	TAHLEQUAH	OK	74464-5021
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13972956
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 470.00	<input type="text"/> 15.00
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MRS. JEANNE HOUGH PARSONS		Date of Receipt
	Mailing Address 222 CEDAR CLUB CIR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 1 8 / 2 0 1 0
	City	State	Zip Code
	CHAPEL HILL	NC	27517-7212
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13971245
Name of Employer HOMEMAKER		Occupation HOMEMAKER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 670.00	<input type="text"/> 60.00
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) TERRY PARSONS		Date of Receipt
	Mailing Address 16 CHERRYWOOD RD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 2 / 2 0 1 0
	City	State	Zip Code
	LOCUST VALLEY	NY	11560-2411
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13945604
Name of Employer SELF-EMPLOYED		Occupation DESIGNER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	<input type="text"/> 50.00
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 125.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1691 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
WILLIAM B. PARSONS

Mailing Address 222 CEDAR CLUB CIR.

City State Zip Code
CHAPEL HILL NC 27517-7212

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13947231

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. WILLIAM D. PARSON

Mailing Address 74172 N LEWISTON RD

City State Zip Code
KENTWOOD LA 70444-5122

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
291.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935464

Amount of Each Receipt this Period

51.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. ANDREA PARTEARROYO

Mailing Address 601 W 57TH ST

City State Zip Code
NEW YORK NY 10019-1063

FEC ID number of contributing federal political committee. **C**

Name of Employer
MONKEY BAR

Occupation
CHEF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955670

Amount of Each Receipt this Period

80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

181.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1692 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. ANDREA PARTEARROYO

Mailing Address 601 W 57TH ST

City State Zip Code
NEW YORK NY 10019-1063

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MONKEY BAR CHEF

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
11 / 19 / 2010

Transaction ID: SA11.13970961

Amount of Each Receipt this Period
80.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN PARTIGAN

Mailing Address 401 9TH STREET, NW
SUITE 900

City State Zip Code
WASHINGTON DC 20004-2145

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NIXON & PEABODY ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
11 / 10 / 2010

Transaction ID: SA11.13968685

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
STANLEY PARZEN

Mailing Address 1104 MICHIGAN AVENUE

City State Zip Code
EVANSTON IL 60202-1438

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MAYER BROWN LLP ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
MM / DD / YYYY
10 / 23 / 2010

Transaction ID: SA11.13947661

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 680.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1693 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
UGO G. PASCARELLA
 Mailing Address 10570 DRAPER AVE
 City State Zip Code
LOS ANGELES CA 90064-4410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
UGP INC. PRESIDENT
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 520.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0
Transaction ID: SA11.13942504
 Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. GEORGIA T. PASCHALL
 Mailing Address 1054 FOXCROFT RD NW
 City State Zip Code
ATLANTA GA 30327-2624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
RETIRED RETIRED
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0
Transaction ID: SA11.13957638
 Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ERNEST E. PATE
 Mailing Address 888 LEE ROAD 401
 City State Zip Code
OPELIKA AL 36804-0116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
RETIRED RETIRED
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0
Transaction ID: SA11.13961684
 Amount of Each Receipt this Period
100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1600.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1694 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. NATVERLAL M. PATEL	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 2019 B NELSON AVE.,	Transaction ID: SA11.13945304
	City State Zip Code REDONDO BEACH CA 90278-2308	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer AXA Occupation AGENT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 468.00	

B.	Full Name (Last, First, Middle Initial) MR. NATVERLAL M. PATEL	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 2019 B NELSON AVE.,	Transaction ID: SA11.13958221
	City State Zip Code REDONDO BEACH CA 90278-2308	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer AXA Occupation AGENT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 468.00	

C.	Full Name (Last, First, Middle Initial) RAM L. PATEL	Date of Receipt MM / DD / YYYY 10 / 29 / 2010
	Mailing Address 12735 SHERY LN	Transaction ID: SA11.13961527
	City State Zip Code SOUTHGATE MI 48195-2383	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer FORD MOTOR CO Occupation ENGINEER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 220.00	

SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1695 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ROBERT PATEY

Mailing Address 7500 N CALLE SIN ENVIDIA APT.

City TUCSON State AZ Zip Code 85718

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 14 / 2010

Transaction ID: SA11.13930294

Amount of Each Receipt this Period 100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ROBERT PATEY

Mailing Address 7500 N CALLE SIN ENVIDIA APT.

City TUCSON State AZ Zip Code 85718

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 21 / 2010

Transaction ID: SA11.13943074

Amount of Each Receipt this Period 100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ROBERT PATEY

Mailing Address 7500 N CALLE SIN ENVIDIA APT.

City TUCSON State AZ Zip Code 85718

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 25 / 2010

Transaction ID: SA11.13954216

Amount of Each Receipt this Period 50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 250.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1696 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. NEERU PATHEPURAM

Mailing Address 22710 OATLANDS GROVE PL

City ASHBURN State VA Zip Code 20148-6733

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 15 / 2010

Transaction ID: SA11.13928338

Amount of Each Receipt this Period 75.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOSEPH E. PATRICK

Mailing Address 90 NAVARRE

City IRVINE State CA Zip Code 92612-1721

FEC ID number of contributing federal political committee. **C**

Name of Employer FLUOR CORPORATION Occupation ACCOUNTANT/AUDITOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt 10 / 26 / 2010

Transaction ID: SA11.13957322

Amount of Each Receipt this Period 200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT A. PATRICK

Mailing Address 120 HOLMES AVE NE SUITE 303

City HUNTSVILLE State AL Zip Code 35801-4830

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation BUS OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 28 / 2010

Transaction ID: SA11.13957743

Amount of Each Receipt this Period 35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 310.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1697 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
GERTRUD PATTERSON

Mailing Address 21314 N 80TH. LN.

City PEORIA State AZ Zip Code 85382-4412

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 801.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13946273
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GERTRUD PATTERSON

Mailing Address 21314 N 80TH. LN.

City PEORIA State AZ Zip Code 85382-4412

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 801.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13948820
Amount of Each Receipt this Period: 75.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GERTRUD PATTERSON

Mailing Address 21314 N 80TH. LN.

City PEORIA State AZ Zip Code 85382-4412

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 801.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13951020
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 175.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1698 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. LINDA S. PATTERSON

Mailing Address **907 IRONWOOD DR**

City **HENDERSON** State **KY** Zip Code **42420-4866**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MATER DEI PROYENTIALATE** Occupation **NURSE**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt **10 / 25 / 2010**

Transaction ID: SA11.13953794

Amount of Each Receipt this Period **1.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. PAULA A. PATTERSON

Mailing Address **679 MONTGOMERY RD**

City **WESTFIELD** State **MA** Zip Code **01085-1084**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **AN DEALER**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt **10 / 18 / 2010**

Transaction ID: SA11.13929088

Amount of Each Receipt this Period **110.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. ROBERTA L. PATTERSON

Mailing Address **19 ELIZABETH CIRCLE**

City **GREENBRAE** State **CA** Zip Code **94904-3033**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **555.00**

Date of Receipt **10 / 29 / 2010**

Transaction ID: SA11.13959096

Amount of Each Receipt this Period **220.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **331.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1699 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
WILLIAM PATTEN

Mailing Address **10205 STEAMBOAT LANDING LN**

City **BURKE** State **VA** Zip Code **22015-2541**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt **10 / 19 / 2010**

Transaction ID: SA11.13931891

Amount of Each Receipt this Period **220.00**

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. EDWARD D. PATTILLO

Mailing Address **406 TURQUOISE ST.**

City **KINGMAN** State **AZ** Zip Code **86401-5564**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **570.00**

Date of Receipt **10 / 19 / 2010**

Transaction ID: SA11.13931712

Amount of Each Receipt this Period **150.00**

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. BILL PATTON

Mailing Address **3402 NORTH ST.**

City **NACOGDOCHES** State **TX** Zip Code **75965-2691**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ALLCOM** Occupation **RETAILER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3000.00**

Date of Receipt **11 / 08 / 2010**

Transaction ID: SA11.13966758

Amount of Each Receipt this Period **1000.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1370.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1700 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. LINDEN E. PATTON

Mailing Address 11311 COROBON LN

City State Zip Code
GREAT FALLS VA 22066-1400

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
385.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 26 / 2010

Transaction ID: SA11.13951522

Amount of Each Receipt this Period
180.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ANDREW PAUL

Mailing Address 283 PONDFIELD ROAD

City State Zip Code
BRONXVILLE NY 10708-4936

FEC ID number of contributing federal political committee. **C**

Name of Employer
ENHANCED CAPITAL PARTNERS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
FOUNDER AND MANAGING PARTNER

Aggregate Year-to-Date ▼
30400.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 29 / 2010

Transaction ID: SA11.13961231

Amount of Each Receipt this Period
30400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DANIEL PAUL

Mailing Address 103 WAVERLY PL

City State Zip Code
NEW YORK NY 10011-9110

FEC ID number of contributing federal political committee. **C**

Name of Employer
WASHINGTON SQUARE HOTEL

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
HOSPITALITY

Aggregate Year-to-Date ▼
401.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 19 / 2010

Transaction ID: SA11.13940960

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

30680.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1701 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. EMMANUEL M. PAUL

Mailing Address 4851 43RD ST

City State Zip Code
WOODSIDE NY 11377-6824

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 362.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13933337

Amount of Each Receipt this Period
16.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. EMMANUEL M. PAUL

Mailing Address 4851 43RD ST

City State Zip Code
WOODSIDE NY 11377-6824

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 362.00

Date of Receipt
MM / DD / YYYY
11 / 16 / 2010

Transaction ID: SA11.13969155

Amount of Each Receipt this Period
16.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. KURT J. PAULEY

Mailing Address 3767 160TH ST

City State Zip Code
FARRAGUT IA 51639-5000

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation CLAIMS ADJUSTER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2010

Transaction ID: SA11.13951441

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 132.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1702 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MISS BERNICE PAULSEN

Mailing Address 9534 STATE ROUTE 141 S

City State Zip Code
MORGANFIELD KY 42437-6952

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929337

Amount of Each Receipt this Period
20.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILLIAM PAULS

Mailing Address 6303 MORI STREET

City State Zip Code
MCLEAN VA 22101-3153

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SUTHERLAND ASBILL AND BRENNAN LLP ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 1 0

Transaction ID: SA11.13928802

Amount of Each Receipt this Period
75.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. BOBBIE N. PAUSTIAN

Mailing Address 1305 7TH AVE

City State Zip Code
MOLINE IL 61265-2010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
KANEZ FLORIST FLORIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931992

Amount of Each Receipt this Period
30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **125.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1703 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. BOBBIE N. PAUSTIAN

Mailing Address 1305 7TH AVE

City State Zip Code
MOLINE IL 61265-2010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
KANEZ FLORIST FLORIST

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940921

Amount of Each Receipt this Period

20.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. JANA PAVLOVSKY

Mailing Address 26 BLACK BEAR LN

City State Zip Code
LITTLETON CO 80127-5764

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HIGH-TEK TUBE CORP MANAGER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941960

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. EDWARD P. PAWLEY, III

Mailing Address 5018 SW 72ND. AVE

City State Zip Code
MIAMI FL 33155-5529

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948318

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

270.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1704 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. EDWARD P. PAWLEY, III

Mailing Address 5018 SW 72ND. AVE

City State Zip Code
MIAMI FL 33155-5529

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13962880

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DON S. PAYNE

Mailing Address 12525 N PENNSYLVANIA AVE. APT.

City State Zip Code
OKLAHOMA CITY OK 73120-9443

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13954359

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. HELEN B. PAYNE

Mailing Address 5131 SANDYFIELDS LN

City State Zip Code
KATY TX 77494-2330

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt
MM / DD / YYYY
10 / 20 / 2010

Transaction ID: SA11.13938462

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 175.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1705 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. HELEN B. PAYNE

Mailing Address 5131 SANDYFIELDS LN

City State Zip Code
KATY TX 77494-2330

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 525.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938463

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. NYLA R. PAYNE

Mailing Address 7250 POPLAR STREET
APARTMENT 124

City State Zip Code
BOISE ID 83704-7366

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 501.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941730

Amount of Each Receipt this Period
101.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. PAULA PAYNE

Mailing Address P.O. BOX 62681

City State Zip Code
COLORADO SPRINGS CO 80962-2681

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
SELF-EMPLOYED CONTRACTOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13927993

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

326.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1706 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. TOMMY PAYNE

Mailing Address **300 BURFORD RD**

City **BRUNSWICK** State **GA** Zip Code **31523-6262**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **10 / 17 / 2010**
Transaction ID: SA11.13928794
 Amount of Each Receipt this Period **160.00**
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN W. PAYSON

Mailing Address **11870 SE DIXIE HWY**

City **HOBE SOUND** State **FL** Zip Code **33455-5456**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **ART DEALER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **540.00**

Date of Receipt **10 / 19 / 2010**
Transaction ID: SA11.13931483
 Amount of Each Receipt this Period **500.00**
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHNNY F. PEARCE

Mailing Address **271 PEARCE RD**

City **FRIERSON** State **LA** Zip Code **71027-2177**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **470.00**

Date of Receipt **11 / 01 / 2010**
Transaction ID: SA11.13960762
 Amount of Each Receipt this Period **200.00**
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **860.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1707 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. ROCHELLE PEARL

Mailing Address 5 WHISPERING OAKS DR.

City State Zip Code
NEW ORLEANS LA 70123-2034

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
309.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954034

Amount of Each Receipt this Period

36.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. MARY PEARNE

Mailing Address P.O. BOX 35504

City State Zip Code
MONTE SERENO CA 95030-0504

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
1130.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13947745

Amount of Each Receipt this Period

330.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. NORMAN L. PEAVY

Mailing Address 5326 WHITMORE STREET

City State Zip Code
FULSHEAR TX 77441-4135

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
301.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959949

Amount of Each Receipt this Period

151.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

517.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1708 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. ARLEEN A. PECK

Mailing Address 2002 WILLOW POND DR

City State Zip Code
RIVERHEAD NY 11901-7221

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 410.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13950863

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MARY PECK

Mailing Address 1401 DIETRICH OAKS DR

City State Zip Code
BALLWIN MO 63021-8011

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13928950

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RALPH PECK

Mailing Address 333 - 11TH ST

City State Zip Code
DEL MAR CA 92014-2607

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13943040

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 140.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1709 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. RICHARD N. PECKHAM		Date of Receipt
	Mailing Address 1111 E HOWELL AVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 4 / 2 0 1 0
	City	State	Zip Code
	ANAHEIM	CA	92805-6453
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13930100
Name of Employer WESTSIDE BLDG. NATL. CORP.		Occupation EXECUTIVE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MR. JOHN PEDERSEN		Date of Receipt
	Mailing Address 19130 246TH AVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 8 / 2 0 1 0
	City	State	Zip Code
	BETTENDORF	IA	52722-8243
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13928846
Name of Employer MERYLL LYNCH		Occupation STOCK BROKER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 455.00
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MS. LINDA G. PEDERSON		Date of Receipt
	Mailing Address HC 34 BOX 115		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 8 / 2 0 1 0
	City	State	Zip Code
	LAS VEGAS	NM	87701
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13928814
Name of Employer HOMEMAKER		Occupation HOMEMAKER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 310.00
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 735.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1710 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. NEIL J. PEDERSEN

Mailing Address 30 RUBAR DRIVE

City State Zip Code
PARLIN NJ 08859-2506

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13964757

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. NORMA T. PEERS

Mailing Address 10323 W GORDON AVE

City State Zip Code
GORDONSVILLE VA 22942-7547

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13969452

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. RACHEL B. PELISSIER

Mailing Address P.O. BOX 122

City State Zip Code
BIG HORN WY 82833-0122

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 402.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 1 0

Transaction ID: SA11.13967316

Amount of Each Receipt this Period

1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

76.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1711 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ERIC C. PELLETIER

Mailing Address 2503 NORTH JEFFERSON STREET

City State Zip Code
ARLINGTON VA 22207-1447

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GENERAL ELECTRIC GOVERNMENT RELATIONS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2100.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928661

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. FRANKLIN E. PELLON

Mailing Address 6987 HALSTEAD AVE

City State Zip Code
RCH CUCAMONGA CA 91701-5216

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 720.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936304

Amount of Each Receipt this Period

30.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. FRANKLIN E. PELLON

Mailing Address 6987 HALSTEAD AVE

City State Zip Code
RCH CUCAMONGA CA 91701-5216

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 720.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944116

Amount of Each Receipt this Period

30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1060.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1712 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. FRANKLIN E. PELLOM

Mailing Address 6987 HALSTEAD AVE

City State Zip Code
RCH CUCAMONGA CA 91701-5216

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 720.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948967

Amount of Each Receipt this Period
30.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. FRANKLIN E. PELLOM

Mailing Address 6987 HALSTEAD AVE

City State Zip Code
RCH CUCAMONGA CA 91701-5216

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 720.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954352

Amount of Each Receipt this Period
30.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. FRANKLIN E. PELLOM

Mailing Address 6987 HALSTEAD AVE

City State Zip Code
RCH CUCAMONGA CA 91701-5216

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 720.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13962345

Amount of Each Receipt this Period
30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 90.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 1713 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. FRANKLIN E. PELLOM

Mailing Address 6987 HALSTEAD AVE

City State Zip Code
RCH CUCAMONGA CA 91701-5216

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 720.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13971220

Amount of Each Receipt this Period
30.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. HARRY A. PELTON

Mailing Address 13288 OAK CREST DRIVE

City State Zip Code
YUCAIPA CA 92399-9592

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952937

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. DORIS M. PELTZ

Mailing Address 11005 BALANTRE LANE

City State Zip Code
POTOMAC MD 20854-1323

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918483

Amount of Each Receipt this Period
205.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **435.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1714 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. GEORGE E. PENCE

Mailing Address 8103 DONNA LN.

City State Zip Code
EDWARDSVILLE IL 62025-6239

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935561

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. RUTH C. PENCE

Mailing Address 524 TURTLE HATCH LN.

City State Zip Code
NAPLES FL 34103-8539

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 580.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13931092

Amount of Each Receipt this Period
60.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. RUTH C. PENCE

Mailing Address 524 TURTLE HATCH LN.

City State Zip Code
NAPLES FL 34103-8539

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 580.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 1 0

Transaction ID: SA11.13966743

Amount of Each Receipt this Period
60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 170.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1715 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. SUE PENDLETON

Mailing Address 9170 OLD RANCH RD.

City State Zip Code
ALTA LOMA CA 91701-4162

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 420.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931674

Amount of Each Receipt this Period

80.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JOHN W. PENNISTEN

Mailing Address 135 WILLOW ST
APT 711

City State Zip Code
BROOKLYN NY 11201-2215

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NY CITY DEPT OF FINANCE COMPUTER SPECIALIST

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 1 0

Transaction ID: SA11.13965476

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JOHN W. PENNISTEN

Mailing Address 135 WILLOW ST
APT 711

City State Zip Code
BROOKLYN NY 11201-2215

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NY CITY DEPT OF FINANCE COMPUTER SPECIALIST

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 1 0

Transaction ID: SA11.13967192

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

230.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1716 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DAVID K. PERDUE

Mailing Address 307 WHITAKER BLVD

City State Zip Code
HUNTINGTON WV 25701-4707

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CITIGROUP BOND TRADER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
MM / DD / YYYY
11 / 20 / 2010

Transaction ID: SA11.13971534

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. JOYCE A. PERIH

Mailing Address 321 SPRUCE ST STE 901

City State Zip Code
SCRANTON PA 18503-1449

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED DOCTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
10 / 29 / 2010

Transaction ID: SA11.13959150

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. BILL PERKINS

Mailing Address 26 MIDDLESEX RD

City State Zip Code
EAST GREENBUSH NY 12061-2517

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED VETERINARIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
10 / 16 / 2010

Transaction ID: SA11.13928701

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1717 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. ELIZABETH RIMMLER PERKINS
Mailing Address P.O. BOX 3705

City State Zip Code
CAREFREE AZ 85377-3705

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0
Transaction ID: SA11.13951945
Amount of Each Receipt this Period
40.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. ELIZABETH RIMMLER PERKINS
Mailing Address P.O. BOX 3705

City State Zip Code
CAREFREE AZ 85377-3705

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0
Transaction ID: SA11.13952553
Amount of Each Receipt this Period
50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GERALD PERKINS
Mailing Address 508 THURBER DR

City State Zip Code
SCHERTZ TX 78154-1146

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CARENET BUSINESS DEVELOPMENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 315.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0
Transaction ID: SA11.13948107
Amount of Each Receipt this Period
50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 140.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1718 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) THOMAS PERKINS	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 302 WINDJAMMER WAY	Transaction ID: SA11.13952962
	City State Zip Code WICHITA FALLS TX 76308-5842	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation TRIO CONSULTING & MANAGEM- ENT, LLC. ENGINEER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

B.	Full Name (Last, First, Middle Initial) MR. PETER HUNTER PEROT	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 3916 GILLON AVENUE	Transaction ID: SA11.13957922
	City State Zip Code DALLAS TX 75205-3117	Amount of Each Receipt this Period 30400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 30400.00	

C.	Full Name (Last, First, Middle Initial) MS. SARAH CATHERINE PEROT	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 3916 GILLON AVENUE	Transaction ID: SA11.13957921
	City State Zip Code DALLAS TX 75205-3117	Amount of Each Receipt this Period 30400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation HOMEMAKER HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 30400.00	

SUBTOTAL of Receipts This Page (optional)	60950.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1719 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. PAVLA PEROUTKA

Mailing Address 5306 CENTRAL AVE

City State Zip Code
WESTERN SPRINGS IL 60558-1834

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 211.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943886

Amount of Each Receipt this Period
21.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. ALBERT PERRINO

Mailing Address 729 TAUNTON RD.

City State Zip Code
WILMINGTON DE 19803-1709

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954814

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HUGH PERRINE

Mailing Address 36423 CAMP CREEK ROAD

City State Zip Code
SPRINGFIELD OR 97478-8757

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation INVESTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13957709

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1121.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1720 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JACK L. PERRIN

Mailing Address 500 EASTGATE LN.

City State Zip Code
SANTA BARBARA CA 93108-2248

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 701.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940443

Amount of Each Receipt this Period

300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
WHIT PERRIN WRIGHT

Mailing Address PO BOX 880

City State Zip Code
JASPER GA 30143-0880

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WHIT PERRIN WRIGHT CONSULTING LLC MANAGEMENT CONSULTANT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13945221

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. ADDIE M. PERRY

Mailing Address 865 OLD DALTON ROAD NE

City State Zip Code
ROME GA 30165-9096

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1641.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944861

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1721 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. ADDIE M. PERRY

Mailing Address 865 OLD DALTON ROAD NE

City State Zip Code
ROME GA 30165-9096

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1641.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953343

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. ADDIE M. PERRY

Mailing Address 865 OLD DALTON ROAD NE

City State Zip Code
ROME GA 30165-9096

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1641.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13969302

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. CAROLE A. PERRY

Mailing Address 10545 RIDGEWATER DR.

City State Zip Code
PAINESVILLE OH 44077-5901

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WEPCO, INC. VP-SECRETARY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 661.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950310

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 125.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1722 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
HARRY F. PERRY

Mailing Address 1153 GUINDA CT

City State Zip Code
CAMARILLO CA 93010-1037

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 330.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956248

Amount of Each Receipt this Period
60.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. JAMES B. PERRY

Mailing Address 206 SE 10TH TER

City State Zip Code
FT LAUDERDALE FL 33301-3634

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13932400

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. MARYANN R. PERRY

Mailing Address 114 BUSHNELL ST
APARTMENT 5

City State Zip Code
BUFFALO NY 14206-2805

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13972869

Amount of Each Receipt this Period
1500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1660.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1723 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. NANCY WHITE PERRY

Mailing Address 9 SAN MIGUEL SQ

City ODESSA State TX Zip Code 79762-8047

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 376.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13933117
 Amount of Each Receipt this Period: 101.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PAUL K. PERRY

Mailing Address 3401 N WILDER ROAD

City PLANT CITY State FL Zip Code 33565-2677

FEC ID number of contributing federal political committee. **C**

Name of Employer TAMPA BAY EMERGENCY PHYSICIAN Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13940920
 Amount of Each Receipt this Period: 100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RALPH STANFORD PERRY

Mailing Address 14115 CHAMPIONS HAMLET CT

City HOUSTON State TX Zip Code 77069-1879

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 321.00

Date of Receipt: 11 / 02 / 2010
Transaction ID: SA11.13964592
 Amount of Each Receipt this Period: 1.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 202.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1724 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. SHIRLEY B. PERRY		Date of Receipt	
	Mailing Address 27 LATHROP RD		M M / D D / Y Y Y Y Y 1 0 / 2 8 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11.13959800
	WELLESLEY	MA	02482-7011	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		1.00	
Name of Employer HOMEMAKER		Occupation HOMEMAKER		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 201.00		

B.	Full Name (Last, First, Middle Initial) MR. VICTOR E. PERRY		Date of Receipt	
	Mailing Address 78 WILL ROGERS DRIVE APARTMENT 331		M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11.13956397
	SARANAC LAKE	NY	12983-2484	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		35.00	
Name of Employer RETIRED		Occupation RETIRED		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00		

C.	Full Name (Last, First, Middle Initial) DR. KARL H. PERZIN		Date of Receipt	
	Mailing Address P.O. BOX 640		M M / D D / Y Y Y Y Y 1 1 / 0 5 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11.13966161
	OAKLAND	NJ	07436-0640	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		500.00	
Name of Employer RETIRED		Occupation RETIRED		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional)	▶	536.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1725 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. DEBORAH L. PESSIN

Mailing Address 602 NEWCASTLE LN

City State Zip Code
GRAND PRAIRIE TX 75052-4411

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951374

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GARY W. PESTELLO

Mailing Address 10198 VIA VERONA

City State Zip Code
RENO NV 89511-5396

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
740.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929079

Amount of Each Receipt this Period
425.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ALBERT W. PETERS

Mailing Address 3417 QUEENSBURG LN

City State Zip Code
FRIENDSWOOD TX 77546-2241

FEC ID number of contributing federal political committee. **C**

Name of Employer UNEMPLOYED
Occupation UNEMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13945840

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **675.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1726 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. ARLENE M. PETERSON	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 12246 190TH AVE SE	Transaction ID: SA11.13931928
	City State Zip Code PLUMMER MN 56748-9632	Amount of Each Receipt this Period 85.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SELF-EMPLOYED FARMER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	

B.	Full Name (Last, First, Middle Initial) DANIEL B. PETERSON	Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address 1939 BURR OAK DR. W	Transaction ID: SA11.13963460
	City State Zip Code GLENVIEW IL 60025-1803	Amount of Each Receipt this Period 120.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation 25 ASSOCIATES IC MARKETING CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 206.00	

C.	Full Name (Last, First, Middle Initial) MS. HOLLY P. PETERSEN	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 349 N 1200 E	Transaction ID: SA11.13931655
	City State Zip Code MAPLETON UT 84664-3930	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional)	▶	255.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1727 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DR. JOHN H. PETERSON	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 1 FOX RUN LN APT 623	Transaction ID: SA11.13934718
	City State Zip Code ORCHARD PARK NY 14127-3173	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

B.	Full Name (Last, First, Middle Initial) KORY PETERSON	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 1614 COLBY AVE	Transaction ID: SA11.13953463
	City State Zip Code EVERETT WA 98201-2024	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) KORY PETERSON	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 1614 COLBY AVE	Transaction ID: SA11.13956614
	City State Zip Code EVERETT WA 98201-2024	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)	65.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1728 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) KORY PETERSON	Date of Receipt MM / DD / YYYY 11 / 22 / 2010
	Mailing Address 1614 COLBY AVE	Transaction ID: SA11.13972726
	City State Zip Code EVERETT WA 98201-2024	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00	

B.	Full Name (Last, First, Middle Initial) MS. MABELLE J. PETERSEN	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 10015 W ROYAL OAK RD. APT. 245 APT 245	Transaction ID: SA11.13946004
	City State Zip Code SUN CITY AZ 85351-3118	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) MARGARET PETNEY	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 42877 NASHUA ST.	Transaction ID: SA11.13956347
	City State Zip Code ASHBURN VA 20147-3638	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional)	105.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1729 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CLOVIS L. PETRIN, JR.
Mailing Address 1983 WHISPERING OAK DR

City State Zip Code
DAYTON OH 45440-2412

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944645

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CLOVIS L. PETRIN, JR.
Mailing Address 1983 WHISPERING OAK DR

City State Zip Code
DAYTON OH 45440-2412

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944703

Amount of Each Receipt this Period
1.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
AUGUSTA PETRONE
Mailing Address P.O. BOX 1037

City State Zip Code
DUBLIN NH 03444-1037

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 1 0

Transaction ID: SA11.13960705

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 291.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1730 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. DALE J. PETRUSHA

Mailing Address 50157 TETON RIDGE RD

City NORTHVILLE State MI Zip Code 48168-6851

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13951487
 Amount of Each Receipt this Period: 100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. HOWARD W. PETTENGILL, JR.

Mailing Address 2015 CANTERBURY DR

City INDIALANTIC State FL Zip Code 32903-4033

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 11 / 03 / 2010
Transaction ID: SA11.13965291
 Amount of Each Receipt this Period: 55.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID A. PETTIT

Mailing Address 379 FYNN VALLEY DR

City LAS VEGAS State NV Zip Code 89148-4454

FEC ID number of contributing federal political committee. **C**

Name of Employer SOUTHWEST SURVEILLANCE SY-STEMS
Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13934102
 Amount of Each Receipt this Period: 80.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 235.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1731 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. TONI PETTIT

Mailing Address P.O. BOX 986

City State Zip Code
JAL NM 88252-0986

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13932433

Amount of Each Receipt this Period

85.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. TONI PETTIT

Mailing Address P.O. BOX 986

City State Zip Code
JAL NM 88252-0986

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941902

Amount of Each Receipt this Period

85.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. ELEANOR O. PETTY

Mailing Address 202 LA JARA BLVD

City State Zip Code
SAN ANTONIO TX 78209-4444

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13972854

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

270.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1732 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. BEVERLY PEVEHOUSE

Mailing Address 810 CANONERO

City MIDLAND State TX Zip Code 79705-1802

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation INVESTMENTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13951959
Amount of Each Receipt this Period: 500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MARTIN PEZELY

Mailing Address 4749 MEADOW VIEW ROAD

City SALT LAKE CITY State UT Zip Code 84107-3942

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 11 / 19 / 2010
Transaction ID: SA11.13972043
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GERALD P. PFAFF

Mailing Address P.O. BOX 927082

City SAN DIEGO State CA Zip Code 92192-7082

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13946232
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 625.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1733 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DEBRA PFLEIGER

Mailing Address 445 RAILROAD AVE B

City State Zip Code
SOUDERTON PA 18964-1350

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CONSTANTIA-COLMAR PRE-PRESS SPECIALIST

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1180.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961508

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. HAROLD B. PHELPS, JR.

Mailing Address 663 MAJESTIC DR

City State Zip Code
SANTA MARIA CA 93455-2300

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 502.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963369

Amount of Each Receipt this Period
1.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ERNEST R. PHILIPPI

Mailing Address 65B MASONIC AVE APT 243

City State Zip Code
WALLINGFORD CT 06492-6110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 261.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928256

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 151.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1734 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DAVID PHILLIPS

Mailing Address 12803 DOVE DRIVE

City BUDA State TX Zip Code 78610-2865

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13942563
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. FRANCES D. PHILLIPS

Mailing Address 1768 OPECHEE DRIVE

City MIAMI State FL Zip Code 33133-2442

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13957159
Amount of Each Receipt this Period: 200.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES W. PHILLIPS

Mailing Address 6122 WHITE ROSE TRL.

City DALLAS State TX Zip Code 75248-4936

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt: 11 / 01 / 2010
Transaction ID: SA11.13962475
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 340.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1735 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
KIMBERLY A. PHILLIPS

Mailing Address **2789 WALKER CT.**

City **EXPORT** State **PA** Zip Code **15632-9307**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt **10 / 25 / 2010**

Transaction ID: SA11.13947747

Amount of Each Receipt this Period **250.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. MICHAEL G. PHILLIPPE

Mailing Address **11563 EAST 1150TH AVENUE**

City **ROBINSON** State **IL** Zip Code **62454-4352**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CRAWFORD MEMORIAL HOSPITAL** Occupation **PHYSICIAN**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **10 / 26 / 2010**

Transaction ID: SA11.13951477

Amount of Each Receipt this Period **160.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. ANN PHILPOT

Mailing Address **10537 SPENCER LANDING LN**

City **LA PORTE** State **TX** Zip Code **77571-9148**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **226.00**

Date of Receipt **10 / 25 / 2010**

Transaction ID: SA11.13952317

Amount of Each Receipt this Period **21.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **431.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1736 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. CHRISTINE PIACENTE	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 4375 MILL LN	Transaction ID: SA11.13928109
	City State Zip Code MATTITUCK NY 11952-1757	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation U S S D TEACHER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

B.	Full Name (Last, First, Middle Initial) MR. JOSEPH PIAZZA	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 3235 PORT ROAYLE DR S #G	Transaction ID: SA11.13943702
	City State Zip Code FORT LAUDERDALE FL 33308-7928	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1140.00	

C.	Full Name (Last, First, Middle Initial) MR. JOSEPH PIAZZA	Date of Receipt MM / DD / YYYY 10 / 29 / 2010
	Mailing Address 3235 PORT ROAYLE DR S #G	Transaction ID: SA11.13961704
	City State Zip Code FORT LAUDERDALE FL 33308-7928	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1140.00	

SUBTOTAL of Receipts This Page (optional)	▶	175.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1737 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JOSEPH PIAZZA

Mailing Address 3235 PORT ROAYLE DR S #G

City State Zip Code
FORT LAUDERDALE FL 33308-7928

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1140.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13973002

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. SYLVIA PICARD

Mailing Address 323 REGENT WOOD RD

City State Zip Code
NORTHFIELD IL 60093-2762

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 281.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946142

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. DELORES S. PICKETT

Mailing Address 8275 MOUNT OLIVE RD

City State Zip Code
CONCORD NC 28025-1369

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MASTER TELECOMMUNICATIONS OWNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918425

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1075.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1738 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. GERALDINE PICKERING
Mailing Address 106 WALNUT ST
City VAN HORNE State IA Zip Code 52346-9840
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 245.00
Date of Receipt 10 / 25 / 2010
Transaction ID: SA11.13952018
Amount of Each Receipt this Period 10.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. IVOR PICKERING
Mailing Address 2857 S RANCHO CIRCLE
City SAINT GEORGE State UT Zip Code 84790-7967
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00
Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13950663
Amount of Each Receipt this Period 50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. LAWRENCE PICKERT
Mailing Address 11336 W 121ST TER
City OVERLAND PARK State KS Zip Code 66213-1978
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 355.00
Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13950537
Amount of Each Receipt this Period 105.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 165.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1739 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ROBERT L. PICKENS

Mailing Address 102 JOE PHILLIPS RD.

City State Zip Code
MADISON AL 35758-9776

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 281.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956344

Amount of Each Receipt this Period

40.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. H E. PICKLE

Mailing Address 20487 WILDCAT RIN RD

City State Zip Code
ESTERO FL 33928

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963026

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JOSEPH A. PIDUTTI

Mailing Address 1330 PETERSON DR.

City State Zip Code
SILVER CITY NM 88061-8871

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 241.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946819

Amount of Each Receipt this Period

51.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

191.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1740 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JOHN PIECUCH

Mailing Address 42 SOUTH TRANQUIL PATH DRIVE

City State Zip Code
THE WOODLANDS TX 77380-2738

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945641

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. DONALD PIERCE

Mailing Address 22 LATHROP RD

City State Zip Code
WELLESLEY MA 02482-7012

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930096

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. MARGERIT PIERCE

Mailing Address 11983 WINDSOR MOSS

City State Zip Code
ELLICOTT CITY MD 21042-7113

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928223

Amount of Each Receipt this Period
70.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **770.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1741 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MELVIN E. PIERCE

Mailing Address P.O. BOX 378

City State Zip Code
SEMMES AL 36575-0378

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MELVIN PIERCE PAINTING IN- C. OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956733

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RONALD D. PIERCE

Mailing Address 33751 BLESSINGTON LN

City State Zip Code
SAN JUAN CAPISTRAN CA 92675-4958

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949738

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. THOMAS O. PIERCE

Mailing Address 2326 DEL PRADO BLVD. S.

City State Zip Code
CAPE CORAL FL 33990-6628

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RE/MAX REALITY TEAM PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 975.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13960751

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **550.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1742 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DANA PIERSON	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 25 GRAND MANOR COURT	Transaction ID: SA11A.13977520
	City State Zip Code SUGAR LAND TX 77478	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	IN-KIND CONTRIBUTION
	Name of Employer Occupation HOMEMAKER HOMEMAKER	IN-KIND: FOOD AND BEVERAGE
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

B.	Full Name (Last, First, Middle Initial) DANA D. PIERSON	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 7 GRAND MANOR COURT	Transaction ID: SA11.13955983
	City State Zip Code SUGAR LAND TX 77479-2557	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) ROGER A. PIERSON	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 9 FULBOURN LN.	Transaction ID: SA11.13944244
	City State Zip Code BELLA VISTA AR 72714-6338	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)	▶	3040.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1743 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. SAMUEL D. PIERSON		Date of Receipt
	Mailing Address 52 HILLCREST RD.		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	MANCHESTER	CT	06040-7011
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer ABAPGT, INC.		Occupation CEO	Transaction ID: SA11.13956748
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>	<input type="text" value="1000.00"/>
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) MR. LEROY PIETZ		Date of Receipt
	Mailing Address 41115 284TH ST.		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	TRIPP	SD	57376-6303
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer PIETZ FARM		Occupation FARMER	Transaction ID: SA11.13958697
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="236.00"/>	<input type="text" value="35.00"/>
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) MRS. ROBERT PIGG		Date of Receipt
	Mailing Address 22207 MOULIN DRIVE		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	BRIARCLIFF	TX	78669-2328
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer RETIRED		Occupation RETIRED	Transaction ID: SA11.13960238
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="300.00"/>	<input type="text" value="100.00"/>
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1135.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1744 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. BRANDON L. PIGOTT

Mailing Address 1136 SHERIDAN RD

City State Zip Code
WILMETTE IL 60091-1772

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13947817

Amount of Each Receipt this Period
210.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. ALPHA PILAND

Mailing Address 900 TAMARACK AVE

City State Zip Code
TALLAHASSEE FL 32303-4649

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
460.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13962933

Amount of Each Receipt this Period
15.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN W. PILKINGTON, JR.

Mailing Address PO BOX 6134

City State Zip Code
TULSA OK 74148-0134

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation OIL & GAS EXPLORATION

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
10 / 20 / 2010

Transaction ID: SA11.13945250

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **2725.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1745 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. EUGENE G. PILLARD	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 1802 MILLCREEK DR.	Transaction ID: SA11.13930138
	City State Zip Code ARCADELPHIA AR 71923-3020	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

B.	Full Name (Last, First, Middle Initial) BEN PIMENTAL	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 4049 FAIRWAY HILLS DR.	Transaction ID: SA11.13953604
	City State Zip Code RAPID CITY SD 57702-5391	Amount of Each Receipt this Period 101.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00	

C.	Full Name (Last, First, Middle Initial) HORST PIMMLER	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 8830 STONEWICK WAY	Transaction ID: SA11.13954696
	City State Zip Code ZIONSVILLE IN 46077-8997	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)	▶	211.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1746 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. LLOYD PINE

Mailing Address 19 SCOTT CIR

City State Zip Code
PURCHASE NY 10577-1905

FEC ID number of contributing federal political committee. **C**

Name of Employer OCCUPATION INFORMATION REQUESTED PER BEST EFFORTS
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13949804
Amount of Each Receipt this Period: 150.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROY PINECI

Mailing Address 23332 PARK COLOMBO

City State Zip Code
CALABASAS CA 91302-2810

FEC ID number of contributing federal political committee. **C**

Name of Employer OCCIDENTAL PETROLEUM CORP. Occupation FINANCE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13945185
Amount of Each Receipt this Period: 500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. STEPHEN M. PINKOS

Mailing Address 3612 AUTUMN DR

City State Zip Code
FORT WORTH TX 76109-2611

FEC ID number of contributing federal political committee. **C**

Name of Employer U. S. PATENT & TRADEMARK OFFICE Occupation DEPUTY DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 775.00

Date of Receipt: 10 / 29 / 2010
Transaction ID: SA11.13959383
Amount of Each Receipt this Period: 500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1150.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1747 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. EUGENIO PINO		Date of Receipt
	Mailing Address 5921 SW 73RD AVE		<input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	MIAMI	FL	33143-1814
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13969175
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="215.00"/>	<input type="text" value="50.00"/>
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) MR. JOE PINSONNEAULT		Date of Receipt
	Mailing Address 1330 ORANGE AVE STE 335		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	CORONADO	CA	92118
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer PINSONNEAULT HOLDINGS		Occupation CEO	Transaction ID: SA11.13947838
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="300.00"/>	<input type="text" value="300.00"/>
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) FRANK PINTOZZI		Date of Receipt
	Mailing Address 6041 TURNER HILL ROAD		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	WOODSTOCK	GA	30188-1921
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer AMERICAN		Occupation PUBLISHER	Transaction ID: SA11.13931471
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="800.00"/>	<input type="text" value="200.00"/>
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="550.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1748 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
FRANK PINTOZZI

Mailing Address 6041 TURNER HILL ROAD

City State Zip Code
WOODSTOCK GA 30188-1921

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AMERICAN PUBLISHER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 1 0

Transaction ID: SA11.13947692

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
FRANK PINTOZZI

Mailing Address 6041 TURNER HILL ROAD

City State Zip Code
WOODSTOCK GA 30188-1921

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AMERICAN PUBLISHER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 1 0

Transaction ID: SA11.13968037

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BRADY PIOCH

Mailing Address 3744 BARBARA DR.

City State Zip Code
STERLING HEIGHTS MI 48310-6104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930393

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 450.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1749 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. CHESTER PIOLATTO

Mailing Address 3340 FULHAM COURT

City State Zip Code
PALMDALE CA 93551-3500

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 234.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13960532

Amount of Each Receipt this Period

30.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. ARA PIRANIAN

Mailing Address 4212 CLEAR VALLEY DR

City State Zip Code
ENCINO CA 91436-3316

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956694

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. FRANCIS X. PISCHEL

Mailing Address 14370 NOLEN LN

City State Zip Code
CHARLOTTE NC 28277-3711

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
XAVIER METAL GROUP INC PRESIDENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 415.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931698

Amount of Each Receipt this Period

105.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

185.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1750 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. DAN L. PISTER

Mailing Address 1642 LARKFIELD AVE

City State Zip Code
WESTLAKE VILLAGE CA 91362-4281

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SARNOVA EXECUTIVE

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	1	0

Transaction ID: SA11.13943013

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. CLARK D. PITCAIRN

Mailing Address P.O. BOX 305

City State Zip Code
BRYN ATHYN PA 19009-0305

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PITCAIRN TRUST COMPANY FINANCIAL TRUSTEE

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 311.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	1	0

Transaction ID: SA11.13968034

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
ROBERT PITCHFORD

Mailing Address 1948 E 500 S

City State Zip Code
VERNAL UT 84078-2825

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 770.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	1	0

Transaction ID: SA11.13946891

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

225.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1751 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
BEVERLY PITTS

Mailing Address 3920 LANNING RD

City State Zip Code
LAWRENCEBURG TN 38464-7587

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SOUTHERN INSURANCE SEROKE-S, INC. OFFICE MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955099

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WALTER PIVNICK

Mailing Address 1126 SW ABINGDON AVE

City State Zip Code
PORT SAINT LUCIE FL 34953-7327

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 735.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929043

Amount of Each Receipt this Period
110.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOSEPH PIZZIMENTI

Mailing Address 82 MULBERRY AVE.

City State Zip Code
GARDEN CITY NY 11530-1817

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 415.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962663

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 260.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1752 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ERVIN PLANK

Mailing Address 5441 ROYAL VISTA LN

City State Zip Code
LAS VEGAS NV 89149-6615

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
310.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13931743

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MANNING B. PLETZ

Mailing Address 1401 WILTSHIRE AVE

City State Zip Code
SAN ANTONIO TX 78209-6050

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
PLETZ CONSTRUCTION LLC GENERAL CONTRACTOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13961128

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. VIRGINIA PLOMCHOK

Mailing Address 8480 LIMEKILN PIKE
APT 17

City State Zip Code
WYNCOTE PA 19095-2816

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
245.00

Date of Receipt
MM / DD / YYYY
11 / 18 / 2010

Transaction ID: SA11.13969712

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

225.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1753 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JOHN F. PLOTH

Mailing Address 722 WALNUT ST. APT. 306
APARTMENT 306

City KANSAS CITY State MO Zip Code 64106-1609

FEC ID number of contributing federal political committee. **C**

Name of Employer REHABILITATION SERVICES Occupation VENDING FACILITY MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13934022
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JOHN F. PLOTH

Mailing Address 722 WALNUT ST. APT. 306
APARTMENT 306

City KANSAS CITY State MO Zip Code 64106-1609

FEC ID number of contributing federal political committee. **C**

Name of Employer REHABILITATION SERVICES Occupation VENDING FACILITY MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 10 / 29 / 2010
Transaction ID: SA11.13961306
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JOHN F. PLOTH

Mailing Address 722 WALNUT ST. APT. 306
APARTMENT 306

City KANSAS CITY State MO Zip Code 64106-1609

FEC ID number of contributing federal political committee. **C**

Name of Employer REHABILITATION SERVICES Occupation VENDING FACILITY MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 11 / 03 / 2010
Transaction ID: SA11.13965345
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 75.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1754 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial) MRS. MARJORIE L. PLUMMER		Date of Receipt MM / DD / YYYY 10 / 25 / 2010
Mailing Address 365 RIM ROCK CIR		Transaction ID: SA11.13953133
City PRESCOTT	State AZ	Zip Code 86303-5547
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 326.00	

B.

Full Name (Last, First, Middle Initial) MRS. MARJORIE L. PLUMMER		Date of Receipt MM / DD / YYYY 10 / 28 / 2010
Mailing Address 365 RIM ROCK CIR		Transaction ID: SA11.13959851
City PRESCOTT	State AZ	Zip Code 86303-5547
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 326.00	

C.

Full Name (Last, First, Middle Initial) MRS. MARJORIE L. PLUMMER		Date of Receipt MM / DD / YYYY 11 / 18 / 2010
Mailing Address 365 RIM ROCK CIR		Transaction ID: SA11.13971309
City PRESCOTT	State AZ	Zip Code 86303-5547
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 326.00	

SUBTOTAL of Receipts This Page (optional)	90.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1755 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. JUSTIN W. PLYLER	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 914 N OCEAN BLVD	Transaction ID: SA11.13951323
	City State Zip Code MYRTLE BEACH SC 29577-3751	Amount of Each Receipt this Period 155.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 365.00

B.	Full Name (Last, First, Middle Initial) ANTHONY E. POGODZINSKI	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 9609 MANITOU PARK DR.	Transaction ID: SA11.13935451
	City State Zip Code MINOCQUA WI 54548-9362	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00

C.	Full Name (Last, First, Middle Initial) ANTHONY E. POGODZINSKI	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 9609 MANITOU PARK DR.	Transaction ID: SA11.13940347
	City State Zip Code MINOCQUA WI 54548-9362	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00

SUBTOTAL of Receipts This Page (optional)	▶	455.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1756 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
WILLIAM C. POHLMANN

Mailing Address 419 WASHINGTON WAY

City State Zip Code
PITTSBURGH PA 15243-1024

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 201.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936605

Amount of Each Receipt this Period

1.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
LORETTA POINDEXTER

Mailing Address 5100 E. SKELLY DRIVE

City State Zip Code
TULSA OK 74135-6565

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
M S COLLINS TRUST MANAGER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13945297

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
KAY G. POITRAS

Mailing Address 949 HAMILTON CIRCLE

City State Zip Code
HAINES CITY FL 33844-2431

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 570.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942542

Amount of Each Receipt this Period

185.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

436.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1757 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CARLTON POLK

Mailing Address 2644 W LAKESHORE DR

City State Zip Code
STARKVILLE MS 39759-8315

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ATMOS PROJECT SPECIALIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929637

Amount of Each Receipt this Period
75.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
S.SGT. JAMES A. POLK

Mailing Address 6001 MORNING GLORY CIR APT A

City State Zip Code
EL PASO TX 79924-5051

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959697

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. OLIVER A. POLLARD, JR.

Mailing Address 1587 WESTOVER AVE

City State Zip Code
PETERSBURG VA 23805-1203

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 1 0

Transaction ID: SA11.13966767

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1125.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1758 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. NORENE POLLEI		Date of Receipt
	Mailing Address 525 E. 2875 N.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 10 / 18 / 2010
	City	State	Zip Code
	PROVO	UT	84604-4236
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13929091
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Amount of Each Receipt this Period	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 415.00	
Occupation INFORMATION REQUESTED PER BEST EFFORTS		CONTRIBUTION	
Aggregate Year-to-Date ▼		<input type="text"/> 415.00	

B.	Full Name (Last, First, Middle Initial) EDGAR WILLIAM POLLUM		Date of Receipt
	Mailing Address 7022 BRUIN CT		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 10 / 25 / 2010
	City	State	Zip Code
	MANASSAS	VA	20111-4374
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13952675
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Amount of Each Receipt this Period	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 25.00	
Occupation INFORMATION REQUESTED PER BEST EFFORTS		CONTRIBUTION	
Aggregate Year-to-Date ▼		<input type="text"/> 210.00	

C.	Full Name (Last, First, Middle Initial) DR. GLENN N. POMERANCE		Date of Receipt
	Mailing Address 8314 MILL RACE DRIVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 10 / 28 / 2010
	City	State	Zip Code
	OOLTEWAH	TN	37363-8839
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13957985
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Amount of Each Receipt this Period	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 200.00	
Occupation INFORMATION REQUESTED PER BEST EFFORTS		CONTRIBUTION	
Aggregate Year-to-Date ▼		<input type="text"/> 1200.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 640.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1759 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) HOWARD C. POMEROY	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 320 OLD HICKORY BLVD	Transaction ID: SA11.13932858
	City State Zip Code NASHVILLE TN 37221-1304	Amount of Each Receipt this Period 1.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

B.	Full Name (Last, First, Middle Initial) MR. CHARLES PONDILL	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 8278 KINGS LANDING LN	Transaction ID: SA11.13954137
	City State Zip Code SMITHFIELD VA 23430-3000	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

C.	Full Name (Last, First, Middle Initial) BOB POOLE	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 2121 OLD GATESBURG ROAD SUITE 200	Transaction ID: SA11A.13977531
	City State Zip Code STATE COLLEGE PA 16803	Amount of Each Receipt this Period 1698.02
	FEC ID number of contributing federal political committee. C	IN-KIND CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1698.02	IN-KIND: FOOD, BEVERAGE AND POSTAGE

SUBTOTAL of Receipts This Page (optional)	▶	1799.02
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1760 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. DONNA M. POOLE

Mailing Address 5310 AVONDALE DRIVE

City State Zip Code
SUGAR LAND TX 77479-3812

FEC ID number of contributing federal political committee. C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
530.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 26 / 2010

Transaction ID: SA11.13955984

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DR. ERNEST T. POOLE

Mailing Address 7400 MYRTLE GROVE RD

City State Zip Code
WILMINGTON NC 28409-4920

FEC ID number of contributing federal political committee. C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
335.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 18 / 2010

Transaction ID: SA11.13928990

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JOHN POOLE

Mailing Address 83 SUMMIT AVE.

City State Zip Code
RIDGEWOOD NJ 07450

FEC ID number of contributing federal political committee. C

Name of Employer
NORTH JERSEY SURGICAL SPE-
CIALISTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
PHYSICIAN

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 24 / 2010

Transaction ID: SA11.13947737

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3050.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1761 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MISS MARY M. POOLE

Mailing Address 8 SOMMERTON COURT

City State Zip Code
GREENSBORO NC 27408-3847

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938524

Amount of Each Receipt this Period

75.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. MELVIN POOLE

Mailing Address 9812 CREEMORE DR

City State Zip Code
TUJUNGA CA 91042-2903

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
RETIRED

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930074

Amount of Each Receipt this Period

40.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. MELVIN POOLE

Mailing Address 9812 CREEMORE DR

City State Zip Code
TUJUNGA CA 91042-2903

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
RETIRED

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13969678

Amount of Each Receipt this Period

40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

155.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1762 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
COL. DONALD GARRUTHERS POORMAN
Mailing Address 70671 OROVILLE CIR.
City RANCHO MIRAGE State CA Zip Code 92270-3414
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 376.00
Date of Receipt 10 / 25 / 2010
Transaction ID: SA11.13952155
Amount of Each Receipt this Period 25.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAMES E. POPEJOY, SR.
Mailing Address 1328 S. HIGHWAY 65
City EUDORA State AR Zip Code 71640-9305
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation FISH GROWER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00
Date of Receipt 10 / 15 / 2010
Transaction ID: SA11.13931335
Amount of Each Receipt this Period 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOSEPH POPOLO, JR.
Mailing Address 4208 BRYN MAWR
City DALLAS State TX Zip Code 75225-6738
FEC ID number of contributing federal political committee. **C**
Name of Employer FREEMAN Occupation CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00
Date of Receipt 10 / 14 / 2010
Transaction ID: SA11.13928408
Amount of Each Receipt this Period 2500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 2625.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1763 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MR. DONALD H. PORTCH</p> <p>Mailing Address 3520 PIEDMONT DR</p> <p>City State Zip Code PLANO TX 75075-6255</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 300.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 21 / 2010</p> <p>Transaction ID: SA11.13942964</p> <p>Amount of Each Receipt this Period 100.00</p> <p>CONTRIBUTION</p>
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<p>B. Full Name (Last, First, Middle Initial) MR. FRANK B. PORTER</p> <p>Mailing Address 28715 CAPANO BAY CT.</p> <p>City State Zip Code MENIFEE CA 92584-9385</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 335.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 18 / 2010</p> <p>Transaction ID: SA11.13933757</p> <p>Amount of Each Receipt this Period 30.00</p> <p>CONTRIBUTION</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) MR. FRANK B. PORTER</p> <p>Mailing Address 28715 CAPANO BAY CT.</p> <p>City State Zip Code MENIFEE CA 92584-9385</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 335.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 11 / 19 / 2010</p> <p>Transaction ID: SA11.13971980</p> <p>Amount of Each Receipt this Period 30.00</p> <p>CONTRIBUTION</p>
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SUBTOTAL of Receipts This Page (optional)	160.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1764 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
NEIL C. PORTER

Mailing Address **303 VALLEY RD. APT. 103**

City **MIDDLETOWN** State **RI** Zip Code **02842-7259**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **215.00**

Date of Receipt **11 / 16 / 2010**
Transaction ID: SA11.13969202
 Amount of Each Receipt this Period **75.00**
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. VERA PORTER

Mailing Address **12885 DUNHAM RD**

City **MEADVILLE** State **PA** Zip Code **16335-4537**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **391.00**

Date of Receipt **11 / 09 / 2010**
Transaction ID: SA11.13967419
 Amount of Each Receipt this Period **30.00**
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. VIRGINIA R. PORTIS

Mailing Address **3210 WINDERLY PINE CV**

City **MEMPHIS** State **TN** Zip Code **38125-1711**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt **10 / 25 / 2010**
Transaction ID: SA11.13951691
 Amount of Each Receipt this Period **100.00**
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **205.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1765 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. WILLA J. PORTMAN

Mailing Address N3598 HIGHLAND RD

City State Zip Code
ANTIGO WI 54409-8772

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937222

Amount of Each Receipt this Period 50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ROBERT M. POSNER

Mailing Address 13505 SHELL BEACH CT.

City State Zip Code
DELRAY BEACH FL 33446-5652

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
SELF-EMPLOYED CHEMIST/PHARMACEUTICAL & GOSNETIC CO.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 610.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918437

Amount of Each Receipt this Period 110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. LAWRENCE POST

Mailing Address 1160 TOWER ROAD

City State Zip Code
BEVERLY HILLS CA 90210-2131

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
POST ADVISORY GROUP, LLC INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 9000.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945305

Amount of Each Receipt this Period 1500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 1660.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1766 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DR. JOE W. POTTER

Mailing Address **815 KNOLL MANOR COURT**

City **CEDAR HILL** State **TX** Zip Code **75104-7807**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **DENTIST**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **460.00**

Date of Receipt **10 / 18 / 2010**

Transaction ID: SA11.13937477

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. KATHLEEN POTTERFIELD

Mailing Address **31 WINDEMERE AVE**

City **STATEN ISLAND** State **NY** Zip Code **10306-2016**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt **10 / 20 / 2010**

Transaction ID: SA11.13938461

Amount of Each Receipt this Period **25.00**

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. KATHLEEN POTTERFIELD

Mailing Address **31 WINDEMERE AVE**

City **STATEN ISLAND** State **NY** Zip Code **10306-2016**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt **11 / 20 / 2010**

Transaction ID: SA11.13971527

Amount of Each Receipt this Period **25.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **150.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1767 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. PATRICIA A. POTTER

Mailing Address 2028 KINGS CROSS LANE

City State Zip Code
CORDOVA TN 38016-5175

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation WRITER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt MM / DD / YYYY
10 / 20 / 2010

Transaction ID: SA11.13938473

Amount of Each Receipt this Period 25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. PATRICIA A. POTTER

Mailing Address 2028 KINGS CROSS LANE

City State Zip Code
CORDOVA TN 38016-5175

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation WRITER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt MM / DD / YYYY
11 / 20 / 2010

Transaction ID: SA11.13971537

Amount of Each Receipt this Period 25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
J. S. POWELL, JR.

Mailing Address PO BOX 14550

City State Zip Code
FORT LAUDERDALE FL 33302-4550

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13942594

Amount of Each Receipt this Period 230.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 280.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1768 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES J. POWELL

Mailing Address 3622 BRISTOL HIGHWAY
SUITE 1

City JOHNSON CITY State TN Zip Code 37601-1409

FEC ID number of contributing federal political committee. **C**

Name of Employer POWELL CONSTRUCTION COMPAN-
NY Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13959339

Amount of Each Receipt this Period
10000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. KAREN POWELL

Mailing Address 8569 YODER ROAD

City WADSWORTH State OH Zip Code 44281-9522

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
470.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13947090

Amount of Each Receipt this Period
110.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. S. MARK POWELL

Mailing Address 2900 TARRY TRAIL

City AUSTIN State TX Zip Code 78703-1153

FEC ID number of contributing federal political committee. **C**

Name of Employer ATLANTIC TRUST Occupation INVESTMENTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 1 0

Transaction ID: SA11.13967218

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **12110.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1769 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT POWERS

Mailing Address 15 DEERPATH RD

City State Zip Code
FLEMINGTON NJ 08822-7017

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928105

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PATRICK A. POWLEN

Mailing Address 3718 E 900 N

City State Zip Code
CAMDEN IN 46917-9244

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
IDEM SCIENTIEST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918808

Amount of Each Receipt this Period
35.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PATRICK A. POWLEN

Mailing Address 3718 E 900 N

City State Zip Code
CAMDEN IN 46917-9244

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
IDEM SCIENTIEST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963351

Amount of Each Receipt this Period
1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 236.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1770 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DR. RAHUL PRAKASH

Mailing Address 1 OURLANE TRAIL

City State Zip Code
HOUSTON TX 77024-2641

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955973

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. LEO B. PRATER

Mailing Address P.O. BOX 831

City State Zip Code
COLORADO CITY TX 79512-0831

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962527

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
BRENT M. PRATLEY

Mailing Address 434 W 750 S

City State Zip Code
OREM UT 84058-6144

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS ONNTODENIC

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 237.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950458

Amount of Each Receipt this Period

37.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2587.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1771 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. LLOYD L. PRATOR

Mailing Address 224 W 11TH ST APT 1
APT 1

City State Zip Code
NEW YORK NY 10014-2217

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ST JOHN'S CHURCH MINISTER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2010

Transaction ID: SA11.13962646

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. EDITH I. PRATT

Mailing Address 273 N HANFORD AVE

City State Zip Code
E WENATCHEE WA 98802-4941

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 391.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13946803

Amount of Each Receipt this Period
31.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. STEPHEN E. PRAY, III

Mailing Address 3283 E ORIOLE WAY

City State Zip Code
CHANDLER AZ 85286-5669

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PEOPLE OF CONOR NETWORK AWRSG PRACTITIONER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2010

Transaction ID: SA11.13957090

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 331.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1772 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ERNEST PREATE, JR.
Mailing Address 1231 COUNTRY CLUB RD
City State Zip Code
CLARKS SUMMIT PA 18411-9426
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation ATTORNEY
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13936090
Amount of Each Receipt this Period 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ERNEST PREATE, JR.
Mailing Address 1231 COUNTRY CLUB RD
City State Zip Code
CLARKS SUMMIT PA 18411-9426
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation ATTORNEY
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00
Date of Receipt 11 / 01 / 2010
Transaction ID: SA11.13963289
Amount of Each Receipt this Period 50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. FRANCES PREDAJNA
Mailing Address 922 ARONA RD.
City State Zip Code
NEW STANTON PA 15672-1109
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 395.00
Date of Receipt 10 / 25 / 2010
Transaction ID: SA11.13954823
Amount of Each Receipt this Period 70.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 220.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1773 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. MARY E. PREDEL	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 59 GARNSEY ROAD	Transaction ID: SA11.13948325
	City State Zip Code REXFORD NY 12148-1205	Amount of Each Receipt this Period 530.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SELF-EMPLOYED BUSINESS OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1660.00	

B.	Full Name (Last, First, Middle Initial) DR. ROBERT C. PRENTICE	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 13343 EDINBURGH DR	Transaction ID: SA11.13957639
	City State Zip Code PALOS HEIGHTS IL 60463-2749	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation HEARTCARE CENTERS OF ILLINOIS PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

C.	Full Name (Last, First, Middle Initial) MR. WILLIAM R. PREUSS	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 11730 S 85TH. AVE	Transaction ID: SA11.13933219
	City State Zip Code PALOS PARK IL 60464-1017	Amount of Each Receipt this Period 101.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

SUBTOTAL of Receipts This Page (optional)	1631.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1774 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROY ALLEN PREVATT

Mailing Address 7644 LEDGEWOOD DR

City State Zip Code
FENTON MI 48430-9226

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MCKESSEN PHARMACY SYSTEM VP SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935807

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROY ALLEN PREVATT

Mailing Address 7644 LEDGEWOOD DR

City State Zip Code
FENTON MI 48430-9226

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MCKESSEN PHARMACY SYSTEM VP SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936311

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RUBERT W. PREVATTT

Mailing Address 2705 COLLINS AVE

City State Zip Code
LAKELAND FL 33803-3303

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13947453

Amount of Each Receipt this Period
75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 275.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1775 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. HERMAN L. PRICE

Mailing Address 5330 HUSTLEVILLE RD

City State Zip Code
ALBERTVILLE AL 35951-4804

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 261.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933338

Amount of Each Receipt this Period

11.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. JUDITH PRICE

Mailing Address 9081 HERMOSA AVE

City State Zip Code
YUCCA VALLEY CA 92284-6079

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13965300

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. OLIVER W. PRICE

Mailing Address 13634 PYRAMID DR

City State Zip Code
FARMERS BRANCH TX 75234-4836

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
METROCREST BILLE CHURCH PASTOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 970.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930859

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

161.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1776 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. OLIVER W. PRICE	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 13634 PYRAMID DR	Transaction ID: SA11.13936873
	City State Zip Code FARMERS BRANCH TX 75234-4836	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation METROCREST BILLE CHURCH PASTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 970.00	

B.	Full Name (Last, First, Middle Initial) RICHARD PRICE	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 1261 ROAD 30	Transaction ID: SA11.13952443
	City State Zip Code LAKE VIEW SC 29563-5203	Amount of Each Receipt this Period 35.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

C.	Full Name (Last, First, Middle Initial) MR. THOMAS PRICE	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 66 DAVISON LANE E	Transaction ID: SA11.13958258A
	City State Zip Code WEST ISLIP NY 11795-5202	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SELF EMPLOYED INVESTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 89.00	CHARGED BACK \$4,950.00 ON 10/28/2010

SUBTOTAL of Receipts This Page (optional)	5085.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1777 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. THOMAS PRICE

Mailing Address 66 DAVISON LANE E

City State Zip Code
WEST ISLIP NY 11795-5202

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED INVESTOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 89.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13958258B

Amount of Each Receipt this Period
-4950.00

CONTRIBUTION

CHARGED BACK

B.

Full Name (Last, First, Middle Initial)
MR. WILL R. PRICE

Mailing Address 2634 LOWELL CIR

City State Zip Code
MELBOURNE FL 32935-2217

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1350.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962740

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. PRESTON PRICHARD

Mailing Address 3577 MAPLEKNOLL PL

City State Zip Code
THOUSAND OAKS CA 91362-1001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955335

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

-4750.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1778 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. CHERYL PRIDE

Mailing Address 3707 SWALLOWTAIL DR

City State Zip Code
MORGANTOWN WV 26508-8825

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2010

Transaction ID: SA11.13965153

Amount of Each Receipt this Period
105.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
EDWARD PRIESS

Mailing Address 3 LARKSPUR CT.

City State Zip Code
ST. CHARLES MO 63301-0627

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13942926

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PAUL E. PRILLAMAN

Mailing Address 1311 70TH ST. NW

City State Zip Code
BRADENTON FL 34209-1258

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13935502

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **455.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1779 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. HOWARD D. PRINGLE

Mailing Address 1501 PRINCETON AVENUE

City State Zip Code
AUSTIN TX 78757-1321

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13945924

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROY PRITCHARD

Mailing Address 2337 FILMORE LN

City State Zip Code
RANCHO CORDOVA CA 95670-4232

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13953339

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
FRANCIS PRIVITERA, SR.

Mailing Address 26 FROST ST.

City State Zip Code
ARLINGTON MA 02474-1039

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED LAWYER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
10 / 29 / 2010

Transaction ID: SA11.13961660

Amount of Each Receipt this Period
80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 180.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1780 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JEFFREY J. PROBST

Mailing Address 5207 VASA TER

City State Zip Code
LOWELL IN 46356-1156

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959101

Amount of Each Receipt this Period
110.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PETER PROLL

Mailing Address 35 ROSS RD

City State Zip Code
LIVINGSTON NJ 07039-6221

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929145

Amount of Each Receipt this Period
60.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PETER PROLL

Mailing Address 35 ROSS RD

City State Zip Code
LIVINGSTON NJ 07039-6221

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Transaction ID: SA11.13968453

Amount of Each Receipt this Period
90.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **260.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1781 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MAURICIA PROPER		Date of Receipt
	Mailing Address PO BOX 308		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 0 1 / 2 0 1 0
	City	State	Zip Code
	ALBERT CITY	IA	50510-0308
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13960742
		Amount of Each Receipt this Period	<input type="text"/> 60.00
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 220.00	
		CONTRIBUTION	

B.	Full Name (Last, First, Middle Initial) MRS. JUDITH C. PROSSER		Date of Receipt
	Mailing Address P.O. BOX 190		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 2 / 2 0 1 0
	City	State	Zip Code
	WINSLOW	AZ	86047-0190
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13945390
		Amount of Each Receipt this Period	<input type="text"/> 100.00
Name of Employer SELF-EMPLOYED		Occupation SELF-EMPLOYED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 205.00	
		CONTRIBUTION	

C.	Full Name (Last, First, Middle Initial) MR. STEPHEN W. PROUGH		Date of Receipt
	Mailing Address 527 HAZEL DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 4 / 2 0 1 0
	City	State	Zip Code
	CORONA DEL MAR	CA	92625-2505
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13932256
		Amount of Each Receipt this Period	<input type="text"/> 5000.00
Name of Employer CIG FINANCIAL		Occupation PRESIDENT & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 5000.00	
		CONTRIBUTION	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 5160.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1782 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT E. PRUITT

Mailing Address 767 BROOKVIEW DR.

City State Zip Code
GREENWOOD IN 46142-1804

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13960231

Amount of Each Receipt this Period
55.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. JULIA PRYDE

Mailing Address 6175 E BRIARWOOD DR

City State Zip Code
CENTENNIAL CO 80112-1031

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949446

Amount of Each Receipt this Period
35.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ELIZABETH C. PRYOR

Mailing Address P.O. BOX 611

City State Zip Code
HAIKU HI 96708-0611

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4291.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941466

Amount of Each Receipt this Period
2001.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 2091.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1783 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. PAULA PULLINS

Mailing Address 9381 SNAPPTOWN RD

City State Zip Code
QUINCY OH 43343-9513

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PULLINS DRAINAGE AND FARMS OWNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 680.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13947805

Amount of Each Receipt this Period
110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. JAMES ELLEN PULOS

Mailing Address 7760 VENTURA CANYON AVENUE

City State Zip Code
PANORAMA CITY CA 91402-6307

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13946745

Amount of Each Receipt this Period
51.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. JAMES ELLEN PULOS

Mailing Address 7760 VENTURA CANYON AVENUE

City State Zip Code
PANORAMA CITY CA 91402-6307

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00

Date of Receipt
MM / DD / YYYY
11 / 12 / 2010

Transaction ID: SA11.13968051

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

211.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1784 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
LAWRENCE PUPA

Mailing Address 309 HICKORY DR.

City State Zip Code
MERIDIAN MS 39305-7901

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
DELTA AIRLINES' Occupation INFORMATION REQUESTED PER BEST EFFORTS
TECHNICAL MECHANICE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 625.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933417

Amount of Each Receipt this Period
375.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. MICHAEL PURCELL

Mailing Address 705 KAYLORS MDW

City State Zip Code
LOCUST GROVE GA 30248-3852

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
DELTA AIRLINES' Occupation INFORMATION REQUESTED PER BEST EFFORTS
TECHNICAL MECHANICE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 355.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918448

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. PATRICK L. PURCELL

Mailing Address 3566 14TH AVE. S

City State Zip Code
GRAND FORKS ND 58201-3704

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
WIRELESS CONCEPTS Occupation INFORMATION REQUESTED PER BEST EFFORTS
MARKETING DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13964565

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **575.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1785 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MR. ROBERT D. PURCELL</p> <p>Mailing Address 630 WYNDEMERE AVE</p> <p>City RIDGEWOOD State NJ Zip Code 07450-3555</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer RETIRED Occupation RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 380.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Transaction ID: SA11.13938595</p> <p>Amount of Each Receipt this Period 100.00</p> <p>CONTRIBUTION</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	0	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	2	0	/	2	0	1	0												

<p>B. Full Name (Last, First, Middle Initial) MR. THOMAS PURNELL</p> <p>Mailing Address 1858 ARTISAN DR</p> <p>City EDGERTON State WI Zip Code 53534-9417</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer SO WI NEWS Occupation OWNER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 785.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Transaction ID: SA11.13960767</p> <p>Amount of Each Receipt this Period 110.00</p> <p>CONTRIBUTION</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	1	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	0	1	/	2	0	1	0												

<p>C. Full Name (Last, First, Middle Initial) DENISE PURSLEY</p> <p>Mailing Address 401 9TH STREET, NW SUITE 900</p> <p>City WASHINGTON State DC Zip Code 20004-2145</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer NIXON & PEABODY Occupation ATTORNEY</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 250.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Transaction ID: SA11.13968682</p> <p>Amount of Each Receipt this Period 250.00</p> <p>CONTRIBUTION</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	0	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	1	0	/	2	0	1	0												

SUBTOTAL of Receipts This Page (optional)	460.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1786 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. RAYMOND F. PUSCZAN	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 132 WILMA PL.	Transaction ID: SA11.13934657
	City State Zip Code PARK RIDGE IL 60068-2763	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

B.	Full Name (Last, First, Middle Initial) MR. RAYMOND F. PUSCZAN	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 132 WILMA PL.	Transaction ID: SA11.13934996
	City State Zip Code PARK RIDGE IL 60068-2763	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

C.	Full Name (Last, First, Middle Initial) MR. RAYMOND F. PUSCZAN	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 132 WILMA PL.	Transaction ID: SA11.13956312
	City State Zip Code PARK RIDGE IL 60068-2763	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

SUBTOTAL of Receipts This Page (optional)	45.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1787 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES PUTNAM

Mailing Address 157 TALLWOOD DR

City State Zip Code
SOUTHINGTON CT 06489-2831

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928891

Amount of Each Receipt this Period
110.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAMES L. PUTT

Mailing Address 28861 CAVELL TER.

City State Zip Code
NAPLES FL 34119-0908

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930130

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MARK PYBURN

Mailing Address 26 HACKBERRY LN APT A

City State Zip Code
HOUSTON TX 77027-5623

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
BOARDWALK PIPELINE PARTNE- RS NATURAL GAS BUSINESS DEVELOPMENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952451

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 410.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1788 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
THERESA PYE

Mailing Address 8725 NW 9TH. PL.

City Gainesville State FL Zip Code 32606-7158

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt 10 / 25 / 2010

Transaction ID: SA11.13954056

Amount of Each Receipt this Period 50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
THERESA M. PYE, JR.

Mailing Address 8725 NW 9TH. PL.

City Gainesville State FL Zip Code 32606-7158

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 01 / 2010

Transaction ID: SA11.13964259

Amount of Each Receipt this Period 50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. DAVID PYOTT

Mailing Address PO BOX 1377

City San Juan Capistran State CA Zip Code 92693-1377

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 10 / 15 / 2010

Transaction ID: SA11.13932342

Amount of Each Receipt this Period 25000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 25100.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1789 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. DIMITRI PYRROS

Mailing Address **21 VANTAGE CT**

City **PORT JEFFERSON** State **NY** Zip Code **11777-2242**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ZELEN & PYRROS** Occupation **DOCTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **10 / 26 / 2010**
Transaction ID: SA11.13957276
 Amount of Each Receipt this Period **250.00**
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MARVIN M. QUAID

Mailing Address **15 PINEHILL WAY**

City **MONTEREY** State **CA** Zip Code **93940-4107**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **10 / 18 / 2010**
Transaction ID: SA11.13935772
 Amount of Each Receipt this Period **100.00**
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. KATHLEEN QUALSET

Mailing Address **478 FLORAL WAY**

City **ROHNERT PARK** State **CA** Zip Code **94928-5713**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **11 / 17 / 2010**
Transaction ID: SA11.13969934
 Amount of Each Receipt this Period **50.00**
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **400.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1790 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JAMES QUANCE

Mailing Address 15738 STEAMBOAT LN.

City HOUSTON State TX Zip Code 77079-2575

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13943271
 Amount of Each Receipt this Period: 50.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JAMES QUANCE

Mailing Address 15738 STEAMBOAT LN.

City HOUSTON State TX Zip Code 77079-2575

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 11 / 18 / 2010
Transaction ID: SA11.13971363
 Amount of Each Receipt this Period: 50.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. CORINNE P. QUAYLE

Mailing Address 1665 S. MAGUIRE DR.

City WICKENBURG State AZ Zip Code 85390-3139

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 30000.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13945626
 Amount of Each Receipt this Period: 30000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 30100.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1791 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. CATHARINA QUELLE

Mailing Address 5205 STONECREEK TRL

City State Zip Code
FORT WAYNE IN 46825-5962

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933376

Amount of Each Receipt this Period
101.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. CRISLER QUICK

Mailing Address 118 HORSESHOE RD.

City State Zip Code
MILL NECK NY 11765-1004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
THE FINANCE DEPARTMENT ACCOUNTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 620.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13960740

Amount of Each Receipt this Period
410.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WENDY D. QUIGLEY

Mailing Address 3720 FOUNTAIN CIR.

City State Zip Code
FOUNTAINVILLE PA 18923-9640

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933290

Amount of Each Receipt this Period
51.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 562.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1792 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) EDWARD QUINN	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 14895 COLT FOOT CT	Transaction ID: SA11.13931456
	City State Zip Code WOODBIDGE VA 22193-3367	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 2000.00	

B.	Full Name (Last, First, Middle Initial) MR. PHILLIP C. QUINN	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 115 COUNTRY ESTATES DR	Transaction ID: SA11.13930938
	City State Zip Code MITCHELL IN 47446-6614	Amount of Each Receipt this Period 1.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 201.00	

C.	Full Name (Last, First, Middle Initial) DR. WILLIAM CHRISTOPHER QUINN	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 3032 MEADOR LANE	Transaction ID: SA11.13943024
	City State Zip Code CONROE TX 77303-2366	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer SELF-EMPLOYED Occupation DENTIST Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 214.00	

SUBTOTAL of Receipts This Page (optional)	2026.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1793 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. MARTHA E. QUINTON

Mailing Address 301 S KEY AVE

City State Zip Code
LAMPASAS TX 76550-2724

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LAMPASAS BOOKKEEPING TAX SERVICE OWNER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	2	/	2	0	1	0

Transaction ID: SA11.13962506

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. OSIRIS QUINTANA

Mailing Address 14100 PALMETTO FRONTAGE RD
STE 390

City State Zip Code
MIAMI LAKES FL 33016

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TRIANGLE ASSOCIATES INC. PRESIDENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13928926

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. TOMMIE QUISENBERRY

Mailing Address 3408 CALLE DE CORRIDA

City State Zip Code
LAS VEGAS NV 89102-3900

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 261.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13955133

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **450.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1794 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. HOLLIS W. RADEMACHER
Mailing Address 1719 LOWELL LN.
City LAKE FOREST State IL Zip Code 60045-3784
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1001.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13932579
Amount of Each Receipt this Period 1.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. HOLLIS W. RADEMACHER
Mailing Address 1719 LOWELL LN.
City LAKE FOREST State IL Zip Code 60045-3784
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1001.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13933402
Amount of Each Receipt this Period 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HOLLIS W. RADEMACHER
Mailing Address 1719 LOWELL LN.
City LAKE FOREST State IL Zip Code 60045-3784
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1001.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13933641
Amount of Each Receipt this Period 200.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 301.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1795 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DR. NANCY L. RADTKE

Mailing Address 1000 N FRONT ST
SUITE 300

City State Zip Code
WORMLEYSBURG PA 17043-1034

FEC ID number of contributing federal political committee. **C**

Name of Employer
MOFFITT HEART & VASCULAR GROUP

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928852

Amount of Each Receipt this Period
300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. SANDRA R. RADTKE

Mailing Address 2925 WILLOW GREEN CT

City State Zip Code
ROSWELL GA 30076-3737

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13957740

Amount of Each Receipt this Period
150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
J. DWIGHT RAGSDALE

Mailing Address 1115 CLAYLICK ROAD

City State Zip Code
WHITE BLUFF TN 37187-4519

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918455

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

550.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1796 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
J. DWIGHT RAGSDALE

Mailing Address 1115 CLAYLICK ROAD

City State Zip Code
WHITE BLUFF TN 37187-4519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954944

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DONALD RAHMES

Mailing Address 14213 CALAIS CIRCLE

City State Zip Code
OKLAHOMA CITY OK 73142-1853

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JMA ENERGY INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13951130

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NADINE F. RAIL

Mailing Address 1401 N PIERCE ST. APT. 4

City State Zip Code
LITTLE ROCK AR 72207-5355

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959484

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **800.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1797 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DAVID E. RAINBOLT

Mailing Address 6226 NORTH RIVIERA DRIVE

City State Zip Code
OKLAHOMA CITY OK 73112-7360

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BANCFIRST BANKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13951118

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. CLAIRE L. RAINS

Mailing Address 420 41ST. AVE

City State Zip Code
SAN FRANCISCO CA 94121-1512

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 561.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941747

Amount of Each Receipt this Period
36.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. CLAIRE L. RAINS

Mailing Address 420 41ST. AVE

City State Zip Code
SAN FRANCISCO CA 94121-1512

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 561.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954323

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **561.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1798 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) YEFIM RAKHLIN		Date of Receipt
	Mailing Address 4608 CONCHITA WAY		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 4 / 2 0 1 0
	City	State	Zip Code
	TARZANA	CA	91356-4906
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13918441
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 265.00	<input type="text"/> 55.00
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) MR. JAMES E. RALEY		Date of Receipt
	Mailing Address 9666 ATHERTON DR.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 4 / 2 0 1 0
	City	State	Zip Code
	DALLAS	TX	75243-6136
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13930299
Name of Employer DORCHESTER MINERALS		Occupation MGR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00	<input type="text"/> 225.00
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) MR. SCOTT RALSTON		Date of Receipt
	Mailing Address 202 CONCORD DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	City	State	Zip Code
	NORMAL	IL	61761-2755
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13953200
Name of Employer SELF-EMPLOYED		Occupation FINANCIAL PLANNER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	<input type="text"/> 50.00
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 330.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1799 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. CHARLES D. RAMAGE		Date of Receipt
	Mailing Address 2940 FM 1071		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 8 / 2 0 1 0
	City	State	Zip Code
	OLTON	TX	79064-2113
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13957647
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MS. RUTH RAMIREZ		Date of Receipt
	Mailing Address 14701 HARCOURT HOUSE LN		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 1 / 2 2 / 2 0 1 0
	City	State	Zip Code
	PFLUGERVILLE	TX	78660-7936
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13971890
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 60.00
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) JOHN RAMMING		Date of Receipt
	Mailing Address 3413 VINTAGE DR		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 1 9 / 2 0 1 0
	City	State	Zip Code
	ROUND ROCK	TX	78664-7902
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13931497
Name of Employer RAMMING PAVING CO		Occupation CONSTRUCTOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 410.00
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 520.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1800 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. L. D. RAMSPOTT

Mailing Address 1423 SAIL CT

City State Zip Code
DISCOVERY BAY CA 94505-9426

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928122

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
JENNIFER S. RAND

Mailing Address 45 COUNTRY CLUB DR SW

City State Zip Code
LAKEWOOD WA 98498-5303

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934861

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. WAYNE C. RANDALL

Mailing Address 19857 GREENVIEW DR.

City State Zip Code
WOODBIDGE CA 95258-9231

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UNITED PALLET SERVICES, INC. PRESIDENT/OWNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 475.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942973

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

2150.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1801 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. WAYNE C. RANDALL

Mailing Address 19857 GREENVIEW DR.

City State Zip Code
WOODBIDGE CA 95258-9231

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UNITED PALLET SERVICES, INC. PRESIDENT/OWNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 475.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13958236

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JAMES P. RANDLE

Mailing Address 2464 BEAR DEN RD

City State Zip Code
FREDERICK MD 21701-9319

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928981

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JAMES P. RANDLE

Mailing Address 2464 BEAR DEN RD

City State Zip Code
FREDERICK MD 21701-9319

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945635

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

210.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1802 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. JACK RANDORFF	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 11 W CANYONVIEW DR	Transaction ID: SA11.13954857
	City State Zip Code RANSOM CANYON TX 79366-2206	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RANDORFF AND ASSOCIATES INC ACOUSTICAL ENGINEER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) MRS. JOY M. RANDOLPH	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 4190 RIVERMONT DR.	Transaction ID: SA11.13948727
	City State Zip Code EVANS GA 30809-4862	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

C.	Full Name (Last, First, Middle Initial) MR. ROBERT S. RANDOLPH	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 301 RIO VISTA RD.	Transaction ID: SA11.13931811
	City State Zip Code TORRINGTON WY 82240-1707	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation HOMEMAKER HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	240.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1803 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. DOUGLAS N. RANEY	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 2615 LANCELOT DR SE	Transaction ID: SA11.13949794
	City State Zip Code HUNTSVILLE AL 35803-1937	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

B.	Full Name (Last, First, Middle Initial) JAMES ALVIN RANKIN	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 325 FOX CHASE ST.	Transaction ID: SA11.13939730
	City State Zip Code WARRENTON VA 20186-2371	Amount of Each Receipt this Period 26.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SELF-EMPLOYED FURNITURE RETAIL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 242.00	

C.	Full Name (Last, First, Middle Initial) JESSICA A. RANSEHOUSEN	Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address P.O. BOX 807	Transaction ID: SA11.13964166
	City State Zip Code UNIONVILLE PA 19375-0807	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

SUBTOTAL of Receipts This Page (optional)	▶	101.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1804 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. VIDA RANUM
Mailing Address 10463 KING CIR
City WESTMINSTER State CO Zip Code 80031-2207
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 233.00
Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13941484
Amount of Each Receipt this Period 22.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. H. LEWIS RAPAPORT
Mailing Address 620 5TH AVE
City PELHAM State NY Zip Code 10803-1208
FEC ID number of contributing federal political committee. **C**
Name of Employer COMPONENT ASSEMBLY SYSTEMS Occupation BUILDING CONTRACTOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 11 / 08 / 2010
Transaction ID: SA11.13966759
Amount of Each Receipt this Period 1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MORTON RAPPAPORT
Mailing Address 3068 DONA SUSANA DR.
City STUDIO CITY State CA Zip Code 91604-4352
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 226.00
Date of Receipt 10 / 20 / 2010
Transaction ID: SA11.13944615
Amount of Each Receipt this Period 25.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1047.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1805 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. MORTON RAPPAPORT		Date of Receipt
	Mailing Address 3068 DONA SUSANA DR.		<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	STUDIO CITY	CA	91604-4352
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13950327
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="226.00"/>	<input type="text" value="25.00"/>
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) MR. MORTON RAPPAPORT		Date of Receipt
	Mailing Address 3068 DONA SUSANA DR.		<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	STUDIO CITY	CA	91604-4352
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13950338
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="226.00"/>	<input type="text" value="25.00"/>
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) MR. MORTON RAPPAPORT		Date of Receipt
	Mailing Address 3068 DONA SUSANA DR.		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	STUDIO CITY	CA	91604-4352
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13954861
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="226.00"/>	<input type="text" value="25.00"/>
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="75.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1806 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. SAM S. RASHID

Mailing Address PO BOX 2190

City State Zip Code
BRANDON FL 33509-2190

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
11 / 05 / 2010

Transaction ID: SA11.13966049

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LAWRENCE RASKIN

Mailing Address 6460 SPARTINA CIR.

City State Zip Code
JUPITER FL 33458-1811

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED
Occupation SELF-EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
10 / 29 / 2010

Transaction ID: SA11.13959387

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN F. RASTATTER

Mailing Address 9540 GUILFORD RD
UNIT 225

City State Zip Code
COLUMBIA MD 21046

FEC ID number of contributing federal political committee. **C**

Name of Employer SERCO NA
Occupation ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13929676

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **5350.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1807 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. THOMAS RASTIN

Mailing Address 17441 GLENN ROAD

City State Zip Code
MOUNT VERNON OH 43050-9502

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13945244

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JAMES M. RATCLIFFE

Mailing Address 445 LIGHTFOOT RD.

City State Zip Code
LOUISVILLE KY 40207-1853

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958324

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. PERRY E. RATLIFF

Mailing Address 807 EVERGREEN ST

City State Zip Code
BORGER TX 79007-6635

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
486.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941130

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10125.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1808 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. PERRY E. RATLIFF

Mailing Address 807 EVERGREEN ST

City BORGER State TX Zip Code 79007-6635

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 486.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13943593
Amount of Each Receipt this Period: 30.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PERRY E. RATLIFF

Mailing Address 807 EVERGREEN ST

City BORGER State TX Zip Code 79007-6635

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 486.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13943662
Amount of Each Receipt this Period: 30.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PERRY E. RATLIFF

Mailing Address 807 EVERGREEN ST

City BORGER State TX Zip Code 79007-6635

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 486.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13951714
Amount of Each Receipt this Period: 30.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 90.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1809 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. PERRY E. RATLIFF		Date of Receipt
	Mailing Address 807 EVERGREEN ST		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	BORGER	TX	79007-6635
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13953611
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 486.00	<input type="text" value="51.00"/>
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MR. JAMES R. RATEREE		Date of Receipt
	Mailing Address 1560 WINDING CREEK CIR		<input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	SNELLVILLE	GA	30078-5814
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13946612
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 201.00	<input type="text" value="101.00"/>
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MR. THOMAS J. RAU		Date of Receipt
	Mailing Address 50264 287TH AVE		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	ELGIN	MN	55932-5253
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13928120
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 290.00	<input type="text" value="35.00"/>
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="187.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1810 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ASHLEY ROSE RAUSCH

Mailing Address 10159 EAT 11TH STREET
SUITE 415

City State Zip Code
TULSA OK 74128

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RAUSCH CORPORATE HOMES REAL ESTATE

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13928418

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ARLE R. RAWLINGS

Mailing Address 15250 N. 12TH STREET

City State Zip Code
PHOENIX AZ 85022-3805

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MASTER CRAFT COMPANY CEO/PRESIDENT

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941763

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GEORGE S. RAWSON

Mailing Address 17050 ARNOLD DR APT F210

City State Zip Code
RIVERSIDE CA 92518-2858

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13947765

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **2800.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1811 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
LEWIS RAY

Mailing Address 1201 TREY CT SW

City State Zip Code
MARIETTA GA 30064-5321

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
430.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951573

Amount of Each Receipt this Period
160.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. WILLIAM N. RAY

Mailing Address 1117 30TH ST SOUTH

City State Zip Code
BIRMINGHAM AL 35205-1103

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
291.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932534

Amount of Each Receipt this Period
51.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. IRIS B. RAYMOND

Mailing Address 18026 SAND WEDGE RD

City State Zip Code
HAGERSTOWN MD 21740-7966

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955046

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **261.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1812 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
BILLIE G. READ

Mailing Address 746 COUNTY RD. 3336

City State Zip Code
PARADISE TX 76073-2226

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949209

Amount of Each Receipt this Period

40.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. WILLIAM READ

Mailing Address 1620 DETWILER CT

City State Zip Code
YORK PA 17403-4622

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13931276

Amount of Each Receipt this Period

75.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. WILLIAM READ

Mailing Address 1620 DETWILER CT

City State Zip Code
YORK PA 17403-4622

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 4 / 2 0 1 0

Transaction ID: SA11.13965748

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

215.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1813 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. ZELLA BERNICE REAGIN

Mailing Address 1750 HAZELWOOD ST

City CONROE	State TX	Zip Code 77301-4031
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. C

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13938342

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. ZELLA BERNICE REAGIN

Mailing Address 1750 HAZELWOOD ST

City CONROE	State TX	Zip Code 77301-4031
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. C

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13964133

Amount of Each Receipt this Period
35.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LAWRENCE REAMS

Mailing Address 8140 COLLINGWOOD CT

City UNIVERSITY PARK	State FL	Zip Code 34201-2349
--------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. C

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949788

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	160.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1814 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. LILLIAN REBER	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 2065 S SAN VINCENT DR	Transaction ID: SA11.13947498
	City State Zip Code GREEN VALLEY AZ 85614-1429	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 205.00	

B.	Full Name (Last, First, Middle Initial) MRS. JANE RECK	Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address 118 BELLEVUE BLVD. S.	Transaction ID: SA11.13963232
	City State Zip Code BELLEVUE NE 68005-2441	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) MR. JOHN J. REDDEN	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address P.O. BOX 243	Transaction ID: SA11.13941362
	City State Zip Code CANTERBURY NH 03224-0243	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	280.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1815 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. PETER REDDING

Mailing Address 166 WINTER ST.

City State Zip Code
HOPKINTON MA 01748-1521

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REDDING ASS. OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13947846

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ALEX J. REDFORD

Mailing Address 2717 E 14TH ST

City State Zip Code
THE DALLES OR 97058-4008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 302.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933029

Amount of Each Receipt this Period
52.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ARTHUR W. REED

Mailing Address 3491 ZURICH CT

City State Zip Code
CARSON CITY NV 89705-7020

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13931084

Amount of Each Receipt this Period
26.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **178.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1816 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. BARBARA J. REED

Mailing Address **P.O. BOX 192**

City **WILLIAMS** State **OR** Zip Code **97544-0192**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **445.00**

Date of Receipt **11 / 12 / 2010**
Transaction ID: SA11.13968308
 Amount of Each Receipt this Period **15.00**
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. FRANKLIN R. REED

Mailing Address **4218 CRUZE RD**

City **KNOXVILLE** State **TN** Zip Code **37920-5118**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **346.00**

Date of Receipt **10 / 21 / 2010**
Transaction ID: SA11.13946213
 Amount of Each Receipt this Period **20.00**
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOHN REED

Mailing Address **808 WEST ST**

City **HOLLISTER** State **CA** Zip Code **95023-4619**

FEC ID number of contributing federal political committee. **C**

Name of Employer **REED MANUFACTURING INC** Occupation **ENGINEER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **10 / 26 / 2010**
Transaction ID: SA11.13957315
 Amount of Each Receipt this Period **80.00**
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **115.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1817 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) JOHN REED	Date of Receipt MM / DD / YYYY 11 / 02 / 2010
	Mailing Address 808 WEST ST	Transaction ID: SA11.13964914
	City State Zip Code HOLLISTER CA 95023-4619	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation REED MANUFACTURING INC ENGINEER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) JOHN REED	Date of Receipt MM / DD / YYYY 11 / 09 / 2010
	Mailing Address 808 WEST ST	Transaction ID: SA11.13967402
	City State Zip Code HOLLISTER CA 95023-4619	Amount of Each Receipt this Period 80.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation REED MANUFACTURING INC ENGINEER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) MRS. JOYCE S. REED	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 56 ROBERT E LEE DR	Transaction ID: SA11.13928210
	City State Zip Code FLAT ROCK NC 28731-7783	Amount of Each Receipt this Period 35.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 209.00	

SUBTOTAL of Receipts This Page (optional)	▶	215.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1818 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MANSEL REED

Mailing Address 1158 HIGHWAY 589

City State Zip Code
SIDNEY TX 76474-3403

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13949727

Amount of Each Receipt this Period
120.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. SHIRLEY A. REED

Mailing Address 5431 EL DORADO DRIVE

City State Zip Code
HUNTINGTON BEACH CA 92649-4569

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13934035

Amount of Each Receipt this Period
120.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. JAMES L. REEDER

Mailing Address 121 LAKE POINTE CIR SW

City State Zip Code
HUNTSVILLE AL 35824-1301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 485.00

Date of Receipt
MM / DD / YYYY
11 / 03 / 2010

Transaction ID: SA11.13965329

Amount of Each Receipt this Period
80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 320.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1819 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. HARRY REEDY
Mailing Address 1100 SEMINOLE DR.
City WEST COLUMBIA State SC Zip Code 29169-6624
FEC ID number of contributing federal political committee. **C**
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 405.00
Date of Receipt 10 / 25 / 2010
Transaction ID: SA11.13947854
Amount of Each Receipt this Period 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. KEN R. REES
Mailing Address 2261 DEBORAH LN
City EDMOND State OK Zip Code 73034-3065
FEC ID number of contributing federal political committee. **C**
Name of Employer HEARTLAND EXPLORATIION
Occupation SELF-EMPLOYED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00
Date of Receipt 10 / 26 / 2010
Transaction ID: SA11.13951528
Amount of Each Receipt this Period 200.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. NORMAN E. REES
Mailing Address 2406 HIGH POINTE CT
City FAIRFIELD State CA Zip Code 94534-7548
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED
Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00
Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13949997
Amount of Each Receipt this Period 40.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 340.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1820 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. NORMAN E. REES	Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address 2406 HIGH POINTE CT	Transaction ID: SA11.13962928
	City State Zip Code FAIRFIELD CA 94534-7548	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

B.	Full Name (Last, First, Middle Initial) WILLIAM B. REES	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 11441 DONA DOROTEA DR.	Transaction ID: SA11.13956470
	City State Zip Code STUDIO CITY CA 91604-4248	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) MR. CLELAND P. REESE	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 492 LENNOX DR	Transaction ID: SA11.13931557
	City State Zip Code FAYETTEVILLE NC 28303-5171	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional)	605.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1821 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. CLELAND P. REESE

Mailing Address 492 LENNOX DR

City State Zip Code
FAYETTEVILLE NC 28303-5171

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13963340

Amount of Each Receipt this Period
75.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. FREDDIE W. REESE

Mailing Address 385 GRAND BLVD

City State Zip Code
BOONE NC 28607-3619

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13938318

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. GLORIA A. REESE

Mailing Address 450 N MAPLE DR

City State Zip Code
BEVERLY HILLS CA 90210-3850

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13928881

Amount of Each Receipt this Period
75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **250.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1822 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. K. DEAN REEVES

Mailing Address 4740 EL MONTE STREET

City State Zip Code
SHAWNEE MISSION KS 66205-1348

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 675.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935457

Amount of Each Receipt this Period
300.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. KATHLEEN REGAN

Mailing Address 500 NEWPORT CENTER DRIVE
SUITE 910

City State Zip Code
NEWPORT BEACH CA 92660-7009

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13951125

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DICK REHM

Mailing Address 6681 S BLUEBIRD RD

City State Zip Code
LAKE TOMAHAWK WI 54539-9450

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938511

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **2350.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1823 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DAVID REHR

Mailing Address 2750 N. QUEBEC STREET

City State Zip Code
ARLINGTON VA 22207-5213

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LEADING AUTHORITIES SENIOR ADVISOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929757

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
GREGORY C. REICHLER

Mailing Address 106 MICHAUX RD

City State Zip Code
RIVERSIDE IL 60546-1828

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954361

Amount of Each Receipt this Period

300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. ELEANOR J. REID

Mailing Address 8110 S. WEST BAY SHORE DRIVE

City State Zip Code
TRAVERSE CITY MI 49684-9487

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 431.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961488

Amount of Each Receipt this Period

55.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1355.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1824 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. LISA REID	Date of Receipt MM / DD / YYYY 10 / 24 / 2010
	Mailing Address 1316 MORAIN PL	Transaction ID: SA11.13947714
	City State Zip Code HEATH TX 75032-8902	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation BRG. PETROLEUM HUMAN RESOURCES MGR.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) MR. WILLIAM R. REID	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 121 4TH STREET	Transaction ID: SA11.13954507
	City State Zip Code DOWNERS GROVE IL 60515-5221	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation PARVIN-CLAUSS SIGN COMPANY SIGN PAINTING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 306.00	

C.	Full Name (Last, First, Middle Initial) MS. BARBARA REIDA	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 711 EDEN TER.	Transaction ID: SA11.13954538
	City State Zip Code EASTON PA 18042-6971	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

SUBTOTAL of Receipts This Page (optional)	▶	1225.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1825 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. LOUIS R. REIF		Date of Receipt
	Mailing Address 225 BRIARHILL RD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 18 / 2010
	City	State	Zip Code
	WILLIAMSVILLE	NY	14221-1843
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13933602
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 262.50	<input type="text"/> 50.00
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MR. JOHN REIFSTECK		Date of Receipt
	Mailing Address 2145 PRESIDENTIAL DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 18 / 2010
	City	State	Zip Code
	CHARLESTON	WV	25314-2371
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13936927
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 270.00	<input type="text"/> 60.00
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MR. GORDON REIGLE		Date of Receipt
	Mailing Address 4813 SPRING MEADOW LN. UNIT 7 UNIT 7		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 19 / 2010
	City	State	Zip Code
	MIDLAND	TX	79705-2945
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13940742
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	<input type="text"/> 100.00
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 210.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1826 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. GORDON REIGLE

Mailing Address 4813 SPRING MEADOW LN. UNIT 7
UNIT 7

City State Zip Code
MIDLAND TX 79705-2945

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 19 / 2010

Transaction ID: SA11.13972012

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. FRANCIS N. REILLY

Mailing Address 1915 CRESCENT DR

City State Zip Code
ROCKPORT TX 78382-3619

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 21 / 2010

Transaction ID: SA11.13946500

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MICHAEL REILLY

Mailing Address 327 JEFFERSON RD

City State Zip Code
PRINCETON NJ 08540-3414

FEC ID number of contributing federal political committee. **C**

Name of Employer
JOHNSON & JOHNSON

Occupation
TAX ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 16 / 2010

Transaction ID: SA11.13928723

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

700.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1827 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
SUSAN W. REILLY

Mailing Address 2750 EVERGREEN POINT RD.

City MEDINA State WA Zip Code 98039-1526

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation CAREGIVER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 236.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13933288
 Amount of Each Receipt this Period: 76.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. THERESA REILLY

Mailing Address 55 S HYDE AVE APT 309

City ISELIN State NJ Zip Code 08830-2183

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 11 / 09 / 2010
Transaction ID: SA11.13967345
 Amount of Each Receipt this Period: 200.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WERNER J. REINARTZ

Mailing Address P.O. BOX 1710

City BETHLEHEM State PA Zip Code 18016-1710

FEC ID number of contributing federal political committee. **C**

Name of Employer REYNOLDS & REYNOLDS ELECTRONICS Occupation SALES & MARKETING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1360.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13943030
 Amount of Each Receipt this Period: 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 526.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1828 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. WERNER J. REINARTZ

Mailing Address P.O. BOX 1710

City State Zip Code
BETHLEHEM PA 18016-1710

FEC ID number of contributing federal political committee. **C**

Name of Employer
REYNOLDS & REYNOLDS ELECT-
RONICS

Occupation
SALES & MARKETING

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1360.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951633

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WERNER J. REINARTZ

Mailing Address P.O. BOX 1710

City State Zip Code
BETHLEHEM PA 18016-1710

FEC ID number of contributing federal political committee. **C**

Name of Employer
REYNOLDS & REYNOLDS ELECT-
RONICS

Occupation
SALES & MARKETING

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1360.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13964546

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WERNER J. REINARTZ

Mailing Address P.O. BOX 1710

City State Zip Code
BETHLEHEM PA 18016-1710

FEC ID number of contributing federal political committee. **C**

Name of Employer
REYNOLDS & REYNOLDS ELECT-
RONICS

Occupation
SALES & MARKETING

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1360.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 5 / 2 0 1 0

Transaction ID: SA11.13968017

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1829 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ZOILA N. REINA

Mailing Address 15974 SW 103RD LANE

City State Zip Code
MIAMI FL 33196-6152

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BAPTIST HOSPITAL NURSE/RN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13954627

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ALLEN P. REINHARDT

Mailing Address 100 FAIRWAY POINTE CIRCLE

City State Zip Code
ORLANDO FL 32828-8508

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13936944

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WM REINHARDT, JR.

Mailing Address 445 HOLLY LN. N

City State Zip Code
SAINT PAUL MN 55128-7034

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
10 / 20 / 2010

Transaction ID: SA11.13943788

Amount of Each Receipt this Period
150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 300.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1830 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. REYNOLD REINSMA

Mailing Address 18358 WILLOW LN

City State Zip Code
LANSING IL 60438-3356

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954505

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. KENNETH M. RENBERG

Mailing Address 15 E 5TH STREET
SUITE 3500

City State Zip Code
TULSA OK 74103-4342

FEC ID number of contributing federal political committee. **C**

Name of Employer
LEE KEELING ASSOCIATES IN-
CORPORATED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

PETROLEUM CONSULTANT

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957915

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. ALMA RENEGAR

Mailing Address P.O. BOX 450907

City State Zip Code
GROVE OK 74345-0907

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼
246.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941387

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

275.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1831 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. ALMA RENEGAR

Mailing Address P.O. BOX 450907

City State Zip Code
GROVE OK 74345-0907

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 246.00

Date of Receipt
MM / DD / YYYY
11 / 22 / 2010

Transaction ID: SA11.13973004

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM F. RENFROW, JR.

Mailing Address 8910 HANA COURT

City State Zip Code
DIAMONDHEAD MS 39525-3667

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2010

Transaction ID: SA11.13957324

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. LOIS RENKER

Mailing Address 50 WILLOW BROOK WAY N

City State Zip Code
DELAWARE OH 43015-3820

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13950508

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **225.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1832 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. ELIZABETH T. RENN

Mailing Address P.O. BOX 176

City

IRON MOUNTAIN

State

MI

Zip Code

49801-0176

FEC ID number of contributing federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

307.00

Date of Receipt

MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13928885

Amount of Each Receipt this Period

45.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. MARY SUSAN RENZI

Mailing Address 1954 W. GLENOAKS, # H

City

ANAHEIM

State

CA

Zip Code

92801-3921

FEC ID number of contributing federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13931632

Amount of Each Receipt this Period

30.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. KAROLY REPASI

Mailing Address N4930 COUNTY ROAD J

City

OXFORD

State

WI

Zip Code

53952-9140

FEC ID number of contributing federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13946573

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

100.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1833 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. KAROLY REPASI

Mailing Address N4930 COUNTY ROAD J

City State Zip Code
OXFORD WI 53952-9140

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
290.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13960601

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DR. DAVID RESEN

Mailing Address PO BOX 43

City State Zip Code
GREEN LAKE WI 54941-0043

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
DAVID RESEN PATHOLOGY SERVICES DOCTOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951357

Amount of Each Receipt this Period

300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DR. DAVID E. RESEN

Mailing Address PO BOX 43

City State Zip Code
GREEN LAKE WI 54941-0043

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
SELF-EMPLOYED PATHOLOGIST

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
1650.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951343

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

575.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1834 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. DONOVAN L. RESH	Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 1 0
	Mailing Address 3709 WASHINGTON WOODS DR	Transaction ID: SA11.13951608
	City State Zip Code ALEXANDRIA VA 22309-2742	Amount of Each Receipt this Period 160.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS		
Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 270.00		

B.	Full Name (Last, First, Middle Initial) MR. ROBERT RESNIK	Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 1 0
	Mailing Address 3517 SHORELINE CIRCLE	Transaction ID: SA11.13959332
	City State Zip Code PALM HARBOR FL 34684-1727	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer Occupation ROBERT RESNIK, INC. REAL ESTATE		
Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 5000.00		

C.	Full Name (Last, First, Middle Initial) MR. JOSEPH A. REYES	Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 1 0
	Mailing Address 10712 ALLOWAY DR.	Transaction ID: SA11.13966113
	City State Zip Code POTOMAC MD 20854-1601	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer Occupation ORION ENT. INC. SELF-EMPLOYED		
Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 350.00		

SUBTOTAL of Receipts This Page (optional)	5360.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1835 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. C REYNOLDS

Mailing Address **917 PIEDMONT AVE**

City **BRISTOL** State **VA** Zip Code **24201-3449**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **11 / 16 / 2010**

Transaction ID: SA11.13969226

Amount of Each Receipt this Period **50.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DEWITT C. REYNOLDS

Mailing Address **P.O. BOX 818
2406 BAYVIEW AVE**

City **BARNEGAT LIGHT** State **NJ** Zip Code **08006-0818**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **265.00**

Date of Receipt **10 / 26 / 2010**

Transaction ID: SA11.13951532

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ROBIN REYNOLDS

Mailing Address **4116 BARBERRY DRIVE**

City **LAFAYETTE HILL** State **PA** Zip Code **19444-1202**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **235.00**

Date of Receipt **10 / 28 / 2010**

Transaction ID: SA11.13959487

Amount of Each Receipt this Period **25.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) **175.00**

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1836 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ROBIN REYNOLDS	Date of Receipt MM / DD / YYYY 11 / 11 / 2010
	Mailing Address 4116 BARBERRY DRIVE	Transaction ID: SA11.13967575
	City State Zip Code LAFAYETTE HILL PA 19444-1202	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation HOMEMAKER HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	

B.	Full Name (Last, First, Middle Initial) ROY F. REYNOLDS	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 127 BLAZING STAR TRL.	Transaction ID: SA11.13940672
	City State Zip Code ALTO NM 88312-8001	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.00	

C.	Full Name (Last, First, Middle Initial) MS. SHIRLEY A. REYNOLDS	Date of Receipt MM / DD / YYYY 11 / 02 / 2010
	Mailing Address 325 COLLEGE ST.	Transaction ID: SA11.13964795
	City State Zip Code MARION VA 24354-2401	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	

SUBTOTAL of Receipts This Page (optional)	▶	165.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1837 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. WAYLAND REYNOLDS

Mailing Address 1106 W HIGHLAND AVE

City State Zip Code
REDLANDS CA 92373-6657

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941230

Amount of Each Receipt this Period

20.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. WAYLAND REYNOLDS

Mailing Address 1106 W HIGHLAND AVE

City State Zip Code
REDLANDS CA 92373-6657

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949319

Amount of Each Receipt this Period

20.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. WAYLAND REYNOLDS

Mailing Address 1106 W HIGHLAND AVE

City State Zip Code
REDLANDS CA 92373-6657

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13960638

Amount of Each Receipt this Period

20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1838 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM T. REYNOLDS

Mailing Address 2905 MARS ST.

City State Zip Code
RALEIGH NC 27604-3923

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
855.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	1	0

Transaction ID: SA11.13931804

Amount of Each Receipt this Period
210.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. ELIZABETH A. RHEINGANS

Mailing Address 3006 E 51ST. ST. APT. 15

City State Zip Code
TULSA OK 74105-6311

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13936920

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ALAN L. RHODES

Mailing Address 3218 RASMONT RD

City State Zip Code
ROANOKE VA 24018-6310

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
214.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	1	0

Transaction ID: SA11.13938960

Amount of Each Receipt this Period
1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **236.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1839 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. BETTY J. RHODERICK	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 10149 SUMAC LN	Transaction ID: SA11.13960434
	City State Zip Code INDIANAPOLIS IN 46236-8481	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS		
Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 275.00		

B.	Full Name (Last, First, Middle Initial) MR. DAVE RHODES	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 20134 E LAKESHORE DR	Transaction ID: SA11.13918820
	City State Zip Code MAGNOLIA TX 77355-6397	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer Occupation HOUSTON DSR PATROL INFORMATION REQUESTED PER BEST EFFORTS		
Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 240.00		

C.	Full Name (Last, First, Middle Initial) MR. EDIN H. RHYNE	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 7218 UNIVERSITY DR P.O. BOX 491	Transaction ID: SA11.13956852
	City State Zip Code HENRICO VA 23229-7422	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer Occupation RETIRED RETIRED		
Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 201.00		

SUBTOTAL of Receipts This Page (optional)	195.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1840 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MAGED F. RIAD

Mailing Address 26 MOUNT HOLLY DRIVE
ROOM 2000

City RYE State NY Zip Code 10580

FEC ID number of contributing federal political committee. **C**

Name of Employer RID & ASSOCIATES P.C. Occupation ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 29 / 2010
Transaction ID: SA11.13961816
Amount of Each Receipt this Period 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ARTHUR R. RIBEN

Mailing Address 2430 RIVIERA DR

City DELRAY BEACH State FL Zip Code 33445-1346

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 985.00

Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13945380
Amount of Each Receipt this Period 410.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JERRY RICE

Mailing Address 115 RIPPLE CREEK ROAD

City SHAVANO PARK State TX Zip Code 78231-1418

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13939040
Amount of Each Receipt this Period 101.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 611.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1841 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JUDITH K. RICE

Mailing Address 679 RIVER RD.

City MONTGOMERY State TX Zip Code 77356-5552

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 289.00

Date of Receipt: 10 / 27 / 2010
Transaction ID: SA11.13955864
Amount of Each Receipt this Period: 150.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LAWRENCE E. RICE

Mailing Address 6939 BURROBACK AVE

City COLORADO SPGS State CO Zip Code 80911-2901

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 331.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13940280
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. MILDRED A. RICE

Mailing Address 2419 AVENUE F

City COUNCIL BLUFFS State IA Zip Code 51501-2251

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER
Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt: 10 / 29 / 2010
Transaction ID: SA11.13959259
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

240.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1842 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT M. RICE

Mailing Address 118 SOUTHERN ST

City State Zip Code
CORPUS CHRISTI TX 78404-1849

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ROYAL EXPLORATION CO. PETROLEUM GEOLOGIST

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1265.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13945224

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT M. RICE

Mailing Address 118 SOUTHERN ST

City State Zip Code
CORPUS CHRISTI TX 78404-1849

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ROYAL EXPLORATION CO. PETROLEUM GEOLOGIST

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1265.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 1 0

Transaction ID: SA11.13966531

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM B. RICE

Mailing Address 6910 HOPEFUL ROD APT 2112

City State Zip Code
FLORENCE KY 41042

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 701.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13965275

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 450.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1843 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
GAYLE RICH

Mailing Address 6298 CAMINO CORTO

City State Zip Code
SAN DIEGO CA 92120-3148

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951677

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. WILLIS A. RICH

Mailing Address 5859 WILD FIG LN

City State Zip Code
FORT MYERS FL 33919-3452

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13965223

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. CARLEEN RICHARDS

Mailing Address P.O. BOX 141359

City State Zip Code
IRVING TX 75014-1359

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ARCHON VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 251.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941590

Amount of Each Receipt this Period

26.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

176.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1844 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. CARLEEN RICHARDS

Mailing Address P.O. BOX 141359

City State Zip Code
IRVING TX 75014-1359

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ARCHON VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt
MM / DD / YYYY
11 / 03 / 2010

Transaction ID: SA11.13965147

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAVID B. RICHARD

Mailing Address 82 BIRCH AVENUE

City State Zip Code
CORTE MADERA CA 94925-1053

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 751.00

Date of Receipt
MM / DD / YYYY
11 / 16 / 2010

Transaction ID: SA11.13969257

Amount of Each Receipt this Period
101.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GAYLE S. RICHARDSON

Mailing Address 12200 BACK CANYON ROAD

City State Zip Code
CALIENTE CA 93518-2823

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 640.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13951847

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 251.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1845 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. HUGH RICHARDSON

Mailing Address 20510 FALCONS LANDING CIR., APT. 1
APT. 1306

City State Zip Code
STERLING VA 20165-7596

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13964774

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JOHN E. RICHARDSON

Mailing Address 771 RIDGEVIEW DR.

City State Zip Code
OGDEN UT 84403-3001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SECURITY OFFICER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 290.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954569

Amount of Each Receipt this Period
30.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. LUNSFORD RICHARDSON, JR.

Mailing Address 6 BUTLER STREET

City State Zip Code
NORWALK CT 06850

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2940.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13931390

Amount of Each Receipt this Period
125.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

405.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1846 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. LUNSFORD RICHARDSON, JR.
Mailing Address 6 BUTLER STREET

City NORWALK State CT Zip Code 06850

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2940.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13956716
Amount of Each Receipt this Period: 1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MARY ELLA RICHARDSON
Mailing Address 509 ROUTE 530 APT. 131

City WHITING State NJ Zip Code 08759-3100

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 211.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13943850
Amount of Each Receipt this Period: 36.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. NORMAN A. RICHARDS
Mailing Address 5115 WOODHURST BLVD.

City FORT WAYNE State IN Zip Code 46807-3135

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13934625
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1086.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1847 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. NORMAN A. RICHARDS

Mailing Address 5115 WOODHURST BLVD.

City State Zip Code
FORT WAYNE IN 46807-3135

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 201.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13935955

Amount of Each Receipt this Period

1.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. NORMAN A. RICHARDS

Mailing Address 5115 WOODHURST BLVD.

City State Zip Code
FORT WAYNE IN 46807-3135

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 201.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13954759

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. NORMAN A. RICHARDS

Mailing Address 5115 WOODHURST BLVD.

City State Zip Code
FORT WAYNE IN 46807-3135

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 201.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13954934

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

51.00

TOTAL This Period (last page this line number only) ►

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1848 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DR. PATRICE RICHARDSON

Mailing Address 14715 BEAR CREEK PASS

City State Zip Code
AUSTIN TX 78737-8935

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1701.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932944

Amount of Each Receipt this Period
201.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. WILLIAM D. RICHARDS

Mailing Address 309 HAMPTON ROAD

City State Zip Code
KNG OF PRUSSA PA 19406-2012

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13964314

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DR. JOSEPH J. RICHERT

Mailing Address PO BOX 189

City State Zip Code
NEW BOSTON MI 48164-0189

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SPECIAL TREE REHAB PHYSICIAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962572

Amount of Each Receipt this Period
110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

361.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1849 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. PATRICIA E. RICHEY	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address P.O. BOX 39	Transaction ID: SA11.13948561
	City State Zip Code GALLATIN GATEWAY MT 59730-0039	Amount of Each Receipt this Period 11.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation TISMCO BUSINESS OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 511.00	

B.	Full Name (Last, First, Middle Initial) MR. RUSTIN J. RICKS	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 66 WALLIS RD	Transaction ID: SA11.13951292
	City State Zip Code VILLA RICA GA 30180-4000	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	

C.	Full Name (Last, First, Middle Initial) MRS. MARGARET RIDDERHEIM	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 12117 CHESTERBROOK CT.	Transaction ID: SA11.13931412
	City State Zip Code FORT WAYNE IN 46845-1965	Amount of Each Receipt this Period 80.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

SUBTOTAL of Receipts This Page (optional)	166.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1850 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. ROBERTA KAYE RIDDELL

Mailing Address 115 HOLLY ST.

City State Zip Code
CONNERSVILLE IN 47331-3334

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 897.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936179

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. ROBERTA KAYE RIDDELL

Mailing Address 115 HOLLY ST.

City State Zip Code
CONNERSVILLE IN 47331-3334

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 897.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937311

Amount of Each Receipt this Period
45.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. ROBERTA KAYE RIDDELL

Mailing Address 115 HOLLY ST.

City State Zip Code
CONNERSVILLE IN 47331-3334

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 897.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953408

Amount of Each Receipt this Period
60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **130.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1851 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL A. RIDGWAY

Mailing Address 2041 MCNEILL STREET

City State Zip Code
PORT TOWNSEND WA 98368-7856

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13963831

Amount of Each Receipt this Period
65.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RONALD H. RIDGWAY

Mailing Address 414 CHARLEMAGNE DR.

City State Zip Code
LAKE SAINT LOUIS MO 63367-2431

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
312.00

Date of Receipt
MM / DD / YYYY
10 / 27 / 2010

Transaction ID: SA11.13958521

Amount of Each Receipt this Period
1.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. MAUREEN RIEBEL

Mailing Address 145 DODGE RD.

City State Zip Code
BOERNE TX 78006-8526

FEC ID number of contributing federal political committee. **C**

Name of Employer ELEGANT EVENTS
Occupation OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt
MM / DD / YYYY
11 / 22 / 2010

Transaction ID: SA11.13971589

Amount of Each Receipt this Period
205.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **271.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1852 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. PAUL D. RIED

Mailing Address 11 HARDING AVE

City State Zip Code
LOCKPORT NY 14094-6020

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REID GROUP C.E.O.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946007

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WALTER H. RIETZ

Mailing Address 32200 SW FRENCH PRAIRIE RD APT

City State Zip Code
WILSONVILLE OR 97070-7888

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13960066

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. VIRGINIA E. RIFFEL

Mailing Address 8414 W 16TH CT N

City State Zip Code
WICHITA KS 67212-5846

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949821

Amount of Each Receipt this Period
30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 380.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1853 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
PAUL W. RIGALI

Mailing Address 125 CARDINAL RD.

City State Zip Code
LEVITTOWN NY 11756-5004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
USPS POSTAL WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 501.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935002

Amount of Each Receipt this Period
80.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PAUL W. RIGALI

Mailing Address 125 CARDINAL RD.

City State Zip Code
LEVITTOWN NY 11756-5004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
USPS POSTAL WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 501.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950290

Amount of Each Receipt this Period
80.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PAUL W. RIGALI

Mailing Address 125 CARDINAL RD.

City State Zip Code
LEVITTOWN NY 11756-5004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
USPS POSTAL WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 501.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13960161

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **210.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1854 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) PAT RIGGENBACH	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 17300 N 88TH AVE APT 137	Transaction ID: SA11.13951328
	City State Zip Code PEORIA AZ 85382-3502	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00

B.	Full Name (Last, First, Middle Initial) MR. ALLAN E. RIGGIN	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 13329 NICKLESON DR	Transaction ID: SA11.13929415
	City State Zip Code WOODBIDGE VA 22193-4168	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00

C.	Full Name (Last, First, Middle Initial) MR. ALLAN E. RIGGIN	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 13329 NICKLESON DR	Transaction ID: SA11.13959782
	City State Zip Code WOODBIDGE VA 22193-4168	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00

SUBTOTAL of Receipts This Page (optional)	150.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1855 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. DONNA M. RIGGINS	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 2273 LANKFORD RD	Transaction ID: SA11.13928827
	City State Zip Code BOWERSVILLE GA 30516-2060	Amount of Each Receipt this Period 210.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RIGGINS PHARMACY PHARMACIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 515.00	

B.	Full Name (Last, First, Middle Initial) MRS. ELEANOR R. RIGGS	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 507 BRIGHTWOOD CLUB DR.	Transaction ID: SA11.13944758
	City State Zip Code LUTHVLE TIMON MD 21093-3631	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

C.	Full Name (Last, First, Middle Initial) DR. MARK RIGO	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 5427 CHAPEL BROOK DRIVE	Transaction ID: SA11.13955974
	City State Zip Code HOUSTON TX 77069-1445	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SELF-EMPLOYED PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	5260.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1856 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. DAVID RILEY

Mailing Address 1957 POTTER ST

City State Zip Code
EUGENE OR 97405-3059

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UNIVERSITY OF ORGEAN PROFESSOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929066

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
ELIZABETH RILEY

Mailing Address 4 WESTBURY RD

City State Zip Code
LUTHERVILLE TIMONI MD 21093-5536

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MERCY MED.CTR. NURSE/RN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 5 / 2 0 1 0

Transaction ID: SA11.13968840

Amount of Each Receipt this Period

60.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. JULIA A. RILEY

Mailing Address 371 QUEENS DR S

City State Zip Code
NEWARK OH 43055-2211

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 507.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931892

Amount of Each Receipt this Period

160.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

320.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1857 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. WILLIAM RILEY

Mailing Address P.O. BOX 73144

City State Zip Code
PUYALLUP WA 98373-0144

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED BUILDER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955014

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. GEORGE G. RINDER

Mailing Address 169 PHEASANT HOLLOW DRIVE

City State Zip Code
WILLOWBROOK IL 60527-5050

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931662

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
PATRICK RIORDAN

Mailing Address 127 SHEPHERDS GLEN RD.

City State Zip Code
HEATH TX 75032-7613

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941169

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

850.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1858 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. SUSANA RIOS

Mailing Address 1099 22ND ST NW

City State Zip Code
WASHINGTON DC 20037-1802

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt MM / DD / YYYY
10 / 15 / 2010

Transaction ID: SA11.13928530

Amount of Each Receipt this Period
75.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. SUSANA RIOS

Mailing Address 1099 22ND ST NW

City State Zip Code
WASHINGTON DC 20037-1802

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt MM / DD / YYYY
11 / 18 / 2010

Transaction ID: SA11.13969821

Amount of Each Receipt this Period
75.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. LAWRENCE RIPAK

Mailing Address 5 TAMMI CT.

City State Zip Code
KINGS PARK NY 11754-5034

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LAWRENCE RIPAK EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt MM / DD / YYYY
10 / 28 / 2010

Transaction ID: SA11.13959817

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) **250.00**

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1859 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOHN RIPPEL

Mailing Address 7 BRENTWOOD COURT

City State Zip Code
SUGAR LAND TX 77479-5659

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ALLIANCE REAL ESTATE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2010

Transaction ID: SA11.13957929

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RICHARD RIPPEAU

Mailing Address 488 NEELY TRAIL

City State Zip Code
VALLEY VIEW TX 76272-9000

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS REAL ESTATE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt
MM / DD / YYYY
11 / 17 / 2010

Transaction ID: SA11.13969884

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DONALD J. RISE

Mailing Address 905 N KINNEY AVE

City State Zip Code
MOUNT PLEASANT MI 48858-1700

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED MACHINE SHOP OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 651.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13936812

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **5150.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1860 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. DONALD J. RISE

Mailing Address 905 N KINNEY AVE

City State Zip Code
MOUNT PLEASANT MI 48858-1700

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED MACHINE SHOP OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 651.00

Date of Receipt
MM / DD / YYYY
11 / 22 / 2010

Transaction ID: SA11.13972905

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. CLAUDE J. RITCHOT

Mailing Address 19436 FOXDALE CIR

City State Zip Code
HUNTINGTON BEACH CA 92648-6614

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RIVERTON STEEL CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13963526

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. DAVID RITCHIE

Mailing Address 401 9TH STREET, NW
SUITE 900

City State Zip Code
WASHINGTON DC 20004-2145

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NIXON & PEABODY ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 289.00

Date of Receipt
MM / DD / YYYY
11 / 10 / 2010

Transaction ID: SA11.13968681

Amount of Each Receipt this Period
289.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 589.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1861 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. KENNETH J. RITCHIE

Mailing Address P.O. BOX 500

City State Zip Code
WEST CHATHAM MA 02669-0500

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 341.00

Date of Receipt
MM / DD / YYYY
10 / 28 / 2010

Transaction ID: SA11.13959946

Amount of Each Receipt this Period
241.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM J. RITCHIE

Mailing Address 621 RODEO RD

City State Zip Code
FULLERTON CA 92835-4050

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1900.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13935515

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM J. RITCHIE

Mailing Address 621 RODEO RD

City State Zip Code
FULLERTON CA 92835-4050

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1900.00

Date of Receipt
MM / DD / YYYY
11 / 22 / 2010

Transaction ID: SA11.13972853

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 741.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1862 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT L. RITER

Mailing Address 3 HILLBURN CT

City State Zip Code
NORTH BARRINGTON IL 60010-6927

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 1 0

Transaction ID: SA11.13966268

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM C. RITTER

Mailing Address 319 HYSLIP AVE

City State Zip Code
WESTFIELD NJ 07090-4188

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 276.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Transaction ID: SA11.13968227

Amount of Each Receipt this Period
75.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. SCOTT RIVENESS

Mailing Address 3911 OAKMONT COURT

City State Zip Code
SUGAR LAND TX 77479-2458

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955975

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 5275.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1863 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RAPHAEL RIVERSO

Mailing Address 1 DORCHESTER DR

City State Zip Code
SCARSDALE NY 10583-2421

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963149

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. EUNICE RIXMAN

Mailing Address 6505 BLUEFIELD PL

City State Zip Code
SAN DIEGO CA 92120-3209

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928876

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DANIEL RIZZI

Mailing Address 401 9TH STREET, NW
SUTE 900

City State Zip Code
WASHINGTON DC 20004-2145

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NIXON & PEABODY PARTNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1297.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 0 / 2 0 1 0

Transaction ID: SA11.13968680

Amount of Each Receipt this Period
1297.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1547.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1864 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
VINCENT RIZZO

Mailing Address 2340 N DE COOK CT.

City State Zip Code
PARK RIDGE IL 60068-1508

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation SERVICE STATION OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	1	0

Transaction ID: SA11.13958827

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
VINCENT RIZZO

Mailing Address 2340 N DE COOK CT.

City State Zip Code
PARK RIDGE IL 60068-1508

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation SERVICE STATION OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	3	/	2	0	1	0

Transaction ID: SA11.13965228

Amount of Each Receipt this Period
15.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CHARLES R. ROACH

Mailing Address 9241 ARBAN DR.

City State Zip Code
SAINT LOUIS MO 63126-2107

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	1	0

Transaction ID: SA11.13943280

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **90.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1865 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
CHARLES R. ROACH

Mailing Address 9241 ARBAN DR.

City State Zip Code
SAINT LOUIS MO 63126-2107

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944936

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
JOSEPH ROBB

Mailing Address 4 GILLAND CT.

City State Zip Code
NOTTINGHAM MD 21236-2901

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UNEMPLOYED UNEMPLOYED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 841.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935663

Amount of Each Receipt this Period

120.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
JOSEPH ROBB

Mailing Address 4 GILLAND CT.

City State Zip Code
NOTTINGHAM MD 21236-2901

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UNEMPLOYED UNEMPLOYED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 841.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949702

Amount of Each Receipt this Period

120.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

265.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1866 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
RITA E. ROBBINS

Mailing Address 1615 CLARK RD

City MARKLE State IN Zip Code 46770-9072

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959646

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KATHLEEN M. ROBE

Mailing Address 2851 CAROB ST

City NEWPORT BEACH State CA Zip Code 92660-3212

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13965257

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. BARBARA J. ROBERSON

Mailing Address P.O. BOX 275

City GAINESVILLE State TX Zip Code 76241-0275

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 1 0

Transaction ID: SA11.13967302

Amount of Each Receipt this Period
30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 230.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1867 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. CINDY ROBERTSON

Mailing Address 12706 COLBY COVE CT

City State Zip Code
CHESTER VA 23831-4343

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 19 / 2010

Transaction ID: SA11.13931602

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. DEBRA K. ROBERTS

Mailing Address 1008 EASTBOURNE CT.

City State Zip Code
FREDERICK MD 21702-5119

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
RETIRED

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 14 / 2010

Transaction ID: SA11.13918545

Amount of Each Receipt this Period

85.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. DONALD C. ROBERTS

Mailing Address 23500 CRISTO REY DRIVE 417E

City State Zip Code
CUPERTINO CA 95014-6533

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
RETIRED

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 18 / 2010

Transaction ID: SA11.13971258

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

485.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1868 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. GLORIA J. ROBERSON

Mailing Address 1204 PALADIN WAY

City PLEASANTON State CA Zip Code 94566-2206

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13947804
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. JANE W. ROBERTS

Mailing Address P.O. BOX 151

City FITZWILLIAM State NH Zip Code 03447-0151

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13940696
Amount of Each Receipt this Period: 220.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JERRY T. ROBERTS

Mailing Address 8801 TRAILING CEDAR DRIVE

City RALEIGH State NC Zip Code 27613-1141

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 11 / 01 / 2010
Transaction ID: SA11.13963701
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 420.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1869 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JERRY T. ROBERTS

Mailing Address 8801 TRAILING CEDAR DRIVE

City State Zip Code
RALEIGH NC 27613-1141

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	1	0

Transaction ID: SA11.13964038

Amount of Each Receipt this Period
15.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. JOSEPH DEAN ROBERTSON

Mailing Address 6422 N LENOX AVENUE

City State Zip Code
NICHOLS HILLS OK 73116-5641

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
635.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13955084

Amount of Each Receipt this Period
80.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MARK ROBERTS

Mailing Address 2185 KYLE ROAD

City State Zip Code
BARTLESVILLE OK 74006-6336

FEC ID number of contributing federal political committee. **C**

Name of Employer MUSKOGEE COMMUNITY HOSPITAL
Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	1	0

Transaction ID: SA11.13942985

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **595.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1870 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. RUTH ROBERTS

Mailing Address 5402 E. MCKELLIPS ROAD
LOT 150

City MESA State AZ Zip Code 85215-2674

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13949696
Amount of Each Receipt this Period 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. S. COLES ROBERTS

Mailing Address 181 MEDFORD LEAS

City MEDFORD State NJ Zip Code 08055-2234

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 346.00

Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13936911
Amount of Each Receipt this Period 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. S. HARRY ROBERTSON

Mailing Address 5994 E ORANGE BLOSSOM LN

City PHOENIX State AZ Zip Code 85018-6733

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 501.00

Date of Receipt 10 / 21 / 2010
Transaction ID: SA11.13945920
Amount of Each Receipt this Period 501.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 651.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1871 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. THOMAS E. ROBERTS

Mailing Address 1257 SPOONBILL LANDINGS CIR

City State Zip Code
BRADENTON FL 34209-7378

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 524.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928467

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. VALDEN L. ROBERTSON

Mailing Address 3902 YEGUA CREEK CT

City State Zip Code
COLLEGE STATION TX 77845

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940665

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SUSAN ROBFOGEL

Mailing Address 401 9TH STREET, NW
SUITE 900

City State Zip Code
WASHINGTON DC 20004-2145

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NIXON & PEABODY ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 0 / 2 0 1 0

Transaction ID: SA11.13968690

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **650.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1872 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. BONNIE B. ROBINSON

Mailing Address 9037 HERITAGE BAY CIR

City State Zip Code
ORLANDO FL 32836-5063

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 211.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948405

Amount of Each Receipt this Period
1.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. EMBREE L. ROBINSON

Mailing Address 8450 LAZY OAKS CT

City State Zip Code
ATLANTA GA 30350-3532

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS CONSULTANT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13928561

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MALCOLM W. ROBINSON, JR.

Mailing Address P.O. BOX 427

City State Zip Code
PONTE VEDRA FL 32004-0427

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933773

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 141.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1873 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. MYRA M. ROBINSON

Mailing Address 5200 N KNOXVILLE AVE APT. 304N

City State Zip Code
PEORIA IL 61614-5057

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955077

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ORRIN S. ROBINSON

Mailing Address 4905 GOODFAITH RD.

City State Zip Code
PINE BLUFF AR 71603-8718

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 861.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932679

Amount of Each Receipt this Period
201.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ORRIN S. ROBINSON

Mailing Address 4905 GOODFAITH RD.

City State Zip Code
PINE BLUFF AR 71603-8718

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 861.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 7 / 2 0 1 0

Transaction ID: SA11.13969888

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **601.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1874 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) RACHEL ROBINSON		Date of Receipt
	Mailing Address BOX 1191866		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 9 / 2 0 1 0
	City	State	Zip Code
	SIoux FALLS	SD	57186-0001
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13932404
		Amount of Each Receipt this Period	<input type="text"/> 2500.00
Name of Employer AIADA		Occupation GOVERNMENT RELATIONS	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 2500.00	

B.	Full Name (Last, First, Middle Initial) MR. STAN ROBINSON		Date of Receipt
	Mailing Address 2830 SKYLINE DR.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 1 5 / 2 0 1 0
	City	State	Zip Code
	RUSSELLVILLE	AR	72802-9785
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13967888
		Amount of Each Receipt this Period	<input type="text"/> 500.00
Name of Employer INNOVATIVE INDUSTRIAL SOLUTION		Occupation PRESIDENT & CEO	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 500.00	

C.	Full Name (Last, First, Middle Initial) WILLIAM W. ROBINSON		Date of Receipt
	Mailing Address 734 BARTON SPRINGS DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 8 / 2 0 1 0
	City	State	Zip Code
	MCKINNEY	TX	75069-1985
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13934644
		Amount of Each Receipt this Period	<input type="text"/> 225.00
Name of Employer RETIRED		Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 375.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 3225.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1875 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MARYLEE C. ROBISON

Mailing Address 8641 SOUTH BRADEN AVENUE

City State Zip Code
TULSA OK 74137-2925

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HIGH TECH RESOURCES, INC. CEO/PRESIDENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13951115

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. RICHARD W. ROBY

Mailing Address 6000 RIVERSIDE DR APT A325

City State Zip Code
DUBLIN OH 43017-5432

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 310.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953024

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. RICH ROCHFORD

Mailing Address 401 9TH STREET, NW
SUITE 900

City State Zip Code
WASHINGTON DC 20004-2145

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NIXONO & PEABODY ATTORNEY

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 0 / 2 0 1 0

Transaction ID: SA11.13968707

Amount of Each Receipt this Period
750.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1876 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. THOMAS L. ROCKWELL	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 31 CARDOGAN SQ	Transaction ID: SA11.13964472
	City ROCHESTER State NY Zip Code 14625-2912	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RMI	Occupation ENGINEER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

B.	Full Name (Last, First, Middle Initial) CHARLES RODEN	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 3530 DAYLON DR.	Transaction ID: SA11.13936715
	City CUMMING State GA Zip Code 30028-4358	Amount of Each Receipt this Period 2.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.00	

C.	Full Name (Last, First, Middle Initial) MR. ROBERT E. RODERIQUE	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 12 SUMMERSWEET LN	Transaction ID: SA11.13946786
	City BALLWIN State MO Zip Code 63011-2706	Amount of Each Receipt this Period 101.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

SUBTOTAL of Receipts This Page (optional)	▶	353.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1877 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) LEE RODGERS</p> <p>Mailing Address 105 MONTROSE ST</p> <hr/> <p>City MORGANTON State NC Zip Code 28655-3710</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer BLUE RIDGE HEALTH CARE Occupation PHYSICIAN</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 250.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M</td><td style="text-align: center;">M</td><td style="text-align: center;">/</td><td style="text-align: center;">D</td><td style="text-align: center;">D</td><td style="text-align: center;">/</td><td style="text-align: center;">Y</td><td style="text-align: center;">Y</td><td style="text-align: center;">Y</td><td style="text-align: center;">Y</td> </tr> <tr> <td style="text-align: center;">1</td><td style="text-align: center;">0</td><td style="text-align: center;">/</td><td style="text-align: center;">1</td><td style="text-align: center;">4</td><td style="text-align: center;">/</td><td style="text-align: center;">2</td><td style="text-align: center;">0</td><td style="text-align: center;">1</td><td style="text-align: center;">0</td> </tr> </table> </p> <p>Transaction ID: SA11.13918914</p> <p>Amount of Each Receipt this Period 100.00 </p> <p>CONTRIBUTION</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	4	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	1	4	/	2	0	1	0												

<p>B. Full Name (Last, First, Middle Initial) WILLIAM H. RODGERS</p> <p>Mailing Address P.O. BOX 15580</p> <hr/> <p>City FERNANDINA BEACH State FL Zip Code 32035-3110</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer DEPT OF HEALTH OF FL Occupation PH</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 251.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M</td><td style="text-align: center;">M</td><td style="text-align: center;">/</td><td style="text-align: center;">D</td><td style="text-align: center;">D</td><td style="text-align: center;">/</td><td style="text-align: center;">Y</td><td style="text-align: center;">Y</td><td style="text-align: center;">Y</td><td style="text-align: center;">Y</td> </tr> <tr> <td style="text-align: center;">1</td><td style="text-align: center;">0</td><td style="text-align: center;">/</td><td style="text-align: center;">1</td><td style="text-align: center;">8</td><td style="text-align: center;">/</td><td style="text-align: center;">2</td><td style="text-align: center;">0</td><td style="text-align: center;">1</td><td style="text-align: center;">0</td> </tr> </table> </p> <p>Transaction ID: SA11.13934275</p> <p>Amount of Each Receipt this Period 51.00 </p> <p>CONTRIBUTION</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	8	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	1	8	/	2	0	1	0												

<p>C. Full Name (Last, First, Middle Initial) EARL G. RODMAN</p> <p>Mailing Address P.O. BOX 12250</p> <hr/> <p>City ODESSA State TX Zip Code 79768-2250</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer SELF-EMPLOYED Occupation OIL & GAS PRODUCTION</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 900.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M</td><td style="text-align: center;">M</td><td style="text-align: center;">/</td><td style="text-align: center;">D</td><td style="text-align: center;">D</td><td style="text-align: center;">/</td><td style="text-align: center;">Y</td><td style="text-align: center;">Y</td><td style="text-align: center;">Y</td><td style="text-align: center;">Y</td> </tr> <tr> <td style="text-align: center;">1</td><td style="text-align: center;">0</td><td style="text-align: center;">/</td><td style="text-align: center;">2</td><td style="text-align: center;">6</td><td style="text-align: center;">/</td><td style="text-align: center;">2</td><td style="text-align: center;">0</td><td style="text-align: center;">1</td><td style="text-align: center;">0</td> </tr> </table> </p> <p>Transaction ID: SA11.13956480</p> <p>Amount of Each Receipt this Period 400.00 </p> <p>CONTRIBUTION</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	6	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	2	6	/	2	0	1	0												

SUBTOTAL of Receipts This Page (optional)	551.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1878 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial) EARL G. RODMAN		Date of Receipt MM / DD / YYYY 11 / 16 / 2010
Mailing Address P.O. BOX 12250		Transaction ID: SA11.13969213
City ODESSA	State TX	Zip Code 79768-2250
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer SELF-EMPLOYED	Occupation OIL & GAS PRODUCTION	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

B.

Full Name (Last, First, Middle Initial) ALFREDO F. RODRIGUEZ		Date of Receipt MM / DD / YYYY 10 / 18 / 2010
Mailing Address 1780 NE 37TH. PL.		Transaction ID: SA11.13932489
City HOMESTEAD	State FL	Zip Code 33033-5577
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.00	

C.

Full Name (Last, First, Middle Initial) ALFREDO F. RODRIGUEZ		Date of Receipt MM / DD / YYYY 10 / 25 / 2010
Mailing Address 1780 NE 37TH. PL.		Transaction ID: SA11.13955217
City HOMESTEAD	State FL	Zip Code 33033-5577
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.00	

SUBTOTAL of Receipts This Page (optional)	220.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1879 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ALFREDO F. RODRIGUEZ		Date of Receipt
	Mailing Address 1780 NE 37TH. PL.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 6 / 2 0 1 0
	City	State	Zip Code
	HOMESTEAD	FL	33033-5577
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13956606
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 10.00
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) JOSPEH A. RODRIGUEZ		Date of Receipt
	Mailing Address 30815 BARRINGTON ST		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 4 / 2 0 1 0
	City	State	Zip Code
	WESTLAND	MI	48186-5324
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13930978
Name of Employer INTERNATIONAL BROTHERHOOD OF ELECTRICIA		Occupation ELECTRICIAN	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 80.00
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) LOUIS RODRIGUEZ, JR.		Date of Receipt
	Mailing Address 3212 W ASHBY PL.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 9 / 2 0 1 0
	City	State	Zip Code
	SAN ANTONIO	TX	78228-5128
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13941439
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 30.00
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 120.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1880 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
LOUIS RODRIGUEZ, JR.
Mailing Address 3212 W ASHBY PL.
City SAN ANTONIO State TX Zip Code 78228-5128
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 407.50
Date of Receipt 10 / 20 / 2010
Transaction ID: SA11.13944096
Amount of Each Receipt this Period 40.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LOUIS RODRIGUEZ, JR.
Mailing Address 3212 W ASHBY PL.
City SAN ANTONIO State TX Zip Code 78228-5128
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 407.50
Date of Receipt 10 / 21 / 2010
Transaction ID: SA11.13946683
Amount of Each Receipt this Period 40.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LOUIS RODRIGUEZ, JR.
Mailing Address 3212 W ASHBY PL.
City SAN ANTONIO State TX Zip Code 78228-5128
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 407.50
Date of Receipt 11 / 22 / 2010
Transaction ID: SA11.13972871
Amount of Each Receipt this Period 30.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 110.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1881 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT T. ROE

Mailing Address 149 GLENGARRY LN

City HAINESPORT State NJ Zip Code 08036-2259

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13951228
Amount of Each Receipt this Period: 60.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. CAROL A. ROEHL

Mailing Address P.O. BOX 208

City VOCA State TX Zip Code 76887-0208

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13940222
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. LUTHER S. ROEHL

Mailing Address 103 PLEASANT VALLEY WAY

City WEST ORANGE State NJ Zip Code 07052-2905

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13934826
Amount of Each Receipt this Period: 500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 610.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1882 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROSS G. ROEPKE

Mailing Address 1102 BRAGG CIRCLE

City State Zip Code
TULLAHOMA TN 37388-2816

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931864

Amount of Each Receipt this Period
60.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
HUGH ROFF

Mailing Address 600 TRAVIS STREET

City State Zip Code
HOUSTON TX 77002-3009

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ROFF RESOURCES LLC CHAIRMAN OF THE BOARD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945597

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
EDDY ROGERS

Mailing Address 3101 RED CORRAL RANCH ROAD

City State Zip Code
WIMBERLEY TX 78676-4129

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ANDREWSKURTH LLP ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 1 0

Transaction ID: SA11.13928690

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **510.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1883 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. EUGENE E. ROGERS

Mailing Address 9105 HAMPSTEAD AVENUE

City State Zip Code
LAS VEGAS NV 89145-8521

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959474

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JAMES W. ROGERS

Mailing Address 2589 ESCADA DR

City State Zip Code
NAPLES FL 34109-3800

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1750.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 4 / 2 0 1 0

Transaction ID: SA11.13965765

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. MARILE L. ROGERS

Mailing Address 24957 FAIRWINDS LANE

City State Zip Code
BONITA SPRINGS FL 34135-9606

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PROPERTY MANAGER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 241.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13960961

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

600.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1884 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. MARILE L. ROGERS		Date of Receipt MM / DD / YYYY 11 / 19 / 2010
	Mailing Address 24957 FAIRWINDS LANE		Transaction ID: SA11.13972029
	City BONITA SPRINGS	State FL	Zip Code 34135-9606
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 65.00
	Name of Employer SELF-EMPLOYED		Occupation PROPERTY MANAGER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 241.00	CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) PETER ROGERS, JR.		Date of Receipt MM / DD / YYYY 10 / 17 / 2010
	Mailing Address 11865 BRIGHT PASSAGE		Transaction ID: SA11.13928741
	City COLUMBIA	State MD	Zip Code 21044-4369
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer MICROS SYSTEMS, INC.		Occupation FINANCE
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MR. DEROY ROGGE		Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 4795 SW LEAFWING DR.		Transaction ID: SA11.13940183
	City LEES SUMMIT	State MO	Zip Code 64082-4864
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
	Name of Employer RETIRED		Occupation RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 217.00	CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

340.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1885 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JEFFREY S. ROGGE

Mailing Address 178 ALDER AVENUE

City State Zip Code
OMRO WI 54963-2014

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ROGGE'S SAUSAGE INC. PRESIDENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 650.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942523

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. LOUIS ROHL

Mailing Address 261 LEDROIT ST

City State Zip Code
LAGUNA BEACH CA 92651-1346

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ROLIL LLC SALES

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954763

Amount of Each Receipt this Period
300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JOHN ROHWER

Mailing Address 16404 PASADENA CIR

City State Zip Code
OMAHA NE 68130-2122

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13957738

Amount of Each Receipt this Period
110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

910.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1886 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. ELIZABETH ROLEN

Mailing Address 7205 N COMANCHE AVE

City WARR ACRES State OK Zip Code 73132-6633

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13955355
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KAREN ROLENCE

Mailing Address 9708 S 49TH AVE.

City OAK LAWN State IL Zip Code 60453-3006

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 211.00

Date of Receipt: 10 / 29 / 2010
Transaction ID: SA11.13961477
Amount of Each Receipt this Period: 30.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BEVERLY S. ROLISON

Mailing Address 5369 N COUNTY ROAD 850 E

City POLAND State IN Zip Code 47868-8208

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13935389
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 120.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1887 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ARTHUR F. ROMANS

Mailing Address 173 PRIVATE DR. 3353

City State Zip Code
CHESAPEAKE OH 45619-7871

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 211.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933000

Amount of Each Receipt this Period
51.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RICK ROMAN

Mailing Address 24 CARROLL COURT

City State Zip Code
SAN RAFAEL CA 94903-3720

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MASSMUTUAL FINANCIAL GROUP INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942939

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. DOLORES C. ROME

Mailing Address 214 GOODWIN MTN LN.

City State Zip Code
ORLEANS VT 05860-9248

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1766.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946912

Amount of Each Receipt this Period
220.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 371.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1888 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. DOLORES C. ROME

Mailing Address 214 GOODWIN MTN LN.

City ORLEANS State VT Zip Code 05860-9248

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1766.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13954797
 Amount of Each Receipt this Period: 75.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. DOLORES C. ROME

Mailing Address 214 GOODWIN MTN LN.

City ORLEANS State VT Zip Code 05860-9248

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1766.00

Date of Receipt: 10 / 28 / 2010
Transaction ID: SA11.13957739
 Amount of Each Receipt this Period: 30.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. DOLORES C. ROME

Mailing Address 214 GOODWIN MTN LN.

City ORLEANS State VT Zip Code 05860-9248

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1766.00

Date of Receipt: 11 / 01 / 2010
Transaction ID: SA11.13963676
 Amount of Each Receipt this Period: 1000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1105.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1889 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROCCO A. ROMEO

Mailing Address 24514 WINONA STREET

City DEARBORN State MI Zip Code 48124-1552

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13949844
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHN ROMERO

Mailing Address P.O. BOX 1536

City COLTON State CA Zip Code 92324-0843

FEC ID number of contributing federal political committee. **C**

Name of Employer SAN BERNARDINO CO SHERIFFS DEPT
Occupation DEP SHERIFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13956323
Amount of Each Receipt this Period: 80.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOHN ROMERO

Mailing Address P.O. BOX 1536

City COLTON State CA Zip Code 92324-0843

FEC ID number of contributing federal political committee. **C**

Name of Employer SAN BERNARDINO CO SHERIFFS DEPT
Occupation DEP SHERIFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13957268
Amount of Each Receipt this Period: 80.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 185.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 1890 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. THOMAS P. ROMOSER

Mailing Address 844 MEDINAH CIR

City WESTMINSTER State MD Zip Code 21158-6125

FEC ID number of contributing federal political committee. **C**

Name of Employer: INFORMATION REQUESTED PER BEST EFFORTS
Occupation: INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 11 / 22 / 2010
Transaction ID: SA11.13971590
 Amount of Each Receipt this Period: 75.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SUSAN RONEY

Mailing Address 401 9TH STREET, NW SUITE 900

City WASHINGTON State DC Zip Code 20004-2145

FEC ID number of contributing federal political committee. **C**

Name of Employer: NIXON & PEABODY
Occupation: ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 11 / 22 / 2010
Transaction ID: SA11.13972720
 Amount of Each Receipt this Period: 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. SHARON ROONEY

Mailing Address 5320 W. 38TH ST.

City ERIE State PA Zip Code 16506-1313

FEC ID number of contributing federal political committee. **C**

Name of Employer: HOMEMAKER
Occupation: HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13936956
 Amount of Each Receipt this Period: 100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 675.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 1891 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. SHARON ROONEY
Mailing Address 5320 W. 38TH ST.
City ERIE State PA Zip Code 16506-1313
FEC ID number of contributing federal political committee. **C**
Name of Employer HOMEMAKER Occupation HOMEMAKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13937464
Amount of Each Receipt this Period 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. SHARON ROONEY
Mailing Address 5320 W. 38TH ST.
City ERIE State PA Zip Code 16506-1313
FEC ID number of contributing federal political committee. **C**
Name of Employer HOMEMAKER Occupation HOMEMAKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13949941
Amount of Each Receipt this Period 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES W. ROOT
Mailing Address 14611 BROADGREEN DR
City HOUSTON State TX Zip Code 77079-6426
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00
Date of Receipt 10 / 21 / 2010
Transaction ID: SA11.13945194
Amount of Each Receipt this Period 100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 300.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1892 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. LINDA L. ROPER

Mailing Address 323 HOWARD ST

City State Zip Code
DELTA CO 81416-3622

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13945391

Amount of Each Receipt this Period
35.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
JONATHAN ROSE

Mailing Address 5955 RANLEIGH MANOR DR

City State Zip Code
MCLEAN VA 22101-2428

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13961256

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. EDWARD ROSENSTEEL

Mailing Address 48 WOODSIDE AVE

City State Zip Code
EAST WINDSOR NJ 08520-4911

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13946981

Amount of Each Receipt this Period
20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **555.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1893 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. EDWARD ROSENSTEEL

Mailing Address 48 WOODSIDE AVE

City EAST WINDSOR State NJ Zip Code 08520-4911

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13954728
Amount of Each Receipt this Period: 20.00
CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. EDWARD ROSENSTEEL

Mailing Address 48 WOODSIDE AVE

City EAST WINDSOR State NJ Zip Code 08520-4911

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13957250
Amount of Each Receipt this Period: 20.00
CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. EVELYN ROSENAU

Mailing Address 1605 N NEW HAMPSHIRE AVE

City TAVARES State FL Zip Code 32778-2133

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 221.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13952187
Amount of Each Receipt this Period: 20.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 60.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1894 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
HERBERT A. ROSENBERG

Mailing Address 87 ARDEN RD

City State Zip Code
TRUMBULL CT 06611-4441

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 740.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13931927

Amount of Each Receipt this Period
85.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RON ROSENBECK

Mailing Address 5525 UNION CENTRE DR

City State Zip Code
WEST CHESTER OH 45069-4820

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REPUBLIC WIRE, INC CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
10 / 20 / 2010

Transaction ID: SA11.13938596

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RONALD W. ROSKENS

Mailing Address 10849 NORTH 58TH PLZ

City State Zip Code
OMAHA NE 68152-1479

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
MM / DD / YYYY
11 / 19 / 2010

Transaction ID: SA11.13972242

Amount of Each Receipt this Period
30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 365.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1895 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. DAVID ROSS

Mailing Address 3144 W 138TH TER

City State Zip Code
OVERLAND PARK KS 66224-4603

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DAVID E. ROSS CONSTRUCTION ENGINEER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931727

Amount of Each Receipt this Period
205.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. LEIGH A. ROSS

Mailing Address 4021 MORNING STAR DRIVE

City State Zip Code
HUNTINGTON BEACH CA 92649-3009

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948343

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. MARY ROSS

Mailing Address 6143 BRASSIE WAY

City State Zip Code
REDDING CA 96003-8004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943677

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

455.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1896 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. RONALD ROSS

Mailing Address PO BOX 111713

City State Zip Code
CAMPBELL CA 95011-1713

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
COMPUTER CONSULTING SELF-EMPLOYED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 215.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955720

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MARY JO ROSSON

Mailing Address 1 LAKE DRIVE
P.O. BOX 483

City State Zip Code
CALHOUN GA 30703-0483

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 3700.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935574

Amount of Each Receipt this Period
3500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. TERRY M. ROTARE

Mailing Address 121 W. LAWRENCE AVENUE

City State Zip Code
ROYAL OAK MI 48073-2543

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 290.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936556

Amount of Each Receipt this Period
1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **3551.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1897 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. TERRY M. ROTARE

Mailing Address 121 W. LAWRENCE AVENUE

City State Zip Code
ROYAL OAK MI 48073-2543

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13942007

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. KATHIE ROTH

Mailing Address PO BOX 187

City State Zip Code
LOOMIS CA 95650-0187

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BRCO CONSTRUCTORS CONTRACTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959146

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MICHAEL G. ROTH

Mailing Address 15185 OAKMONT ST

City State Zip Code
OVERLAND PARK KS 66221-2359

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953642

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **440.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1898 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. STEVEN ROTHACKER

Mailing Address 689 KENTWOOD DR

City State Zip Code
ROCKWALL TX 75032-7505

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED CONTRACTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940596

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. RICHARD B. ROTHMAN

Mailing Address 12719 FOLLY QUARTER RD

City State Zip Code
ELLICOTT CITY MD 21042-1275

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FAST CAT PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943396

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GARY S. ROUCH

Mailing Address 30615 PINE BLUFF DRIVE

City State Zip Code
ELKHART IN 46517-8806

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NORTHER INDIANA LINEMAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932975

Amount of Each Receipt this Period
31.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **331.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 1899 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. T. M. ROUDEBUSH

Mailing Address 7300 W 100TH PL

City State Zip Code
OVERLAND PARK KS 66212-2427

FEC ID number of contributing federal political committee. **C**

Name of Employer ACRO CLEANERS Occupation SALES & MFG

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13941166
Amount of Each Receipt this Period: 500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DONALD L. ROUPP

Mailing Address 408 MARLBORO ST.

City State Zip Code
AUGUSTA GA 30907-3041

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 427.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13934203
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DONALD L. ROUPP

Mailing Address 408 MARLBORO ST.

City State Zip Code
AUGUSTA GA 30907-3041

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 427.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13943668
Amount of Each Receipt this Period: 20.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 560.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1900 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. DONALD L. ROUPP

Mailing Address 408 MARLBORO ST.

City State Zip Code
AUGUSTA GA 30907-3041

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 427.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953426

Amount of Each Receipt this Period

40.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. ELLEN C. ROUTSON

Mailing Address 1401 HERMITS WAY

City State Zip Code
THE DALLES OR 97058-3807

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 211.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959537

Amount of Each Receipt this Period

1.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. MAURICE B. ROWE

Mailing Address 4121 SOUTHAVEN RD

City State Zip Code
RICHMOND VA 23235-1026

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936148

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

241.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1901 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. MURIEL ISOM ROWLAND

Mailing Address 147 DEL MESA CARMEL

City State Zip Code
CARMEL CA 93923-7950

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935773

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. THOMAS C. ROWLAND, JR.

Mailing Address 74 SWAN POINT TRL.

City State Zip Code
GEORGETOWN SC 29440-7038

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 362.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934973

Amount of Each Receipt this Period

2.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DR. DONALD E. ROY

Mailing Address 1360 E HERNDON AVE # 301

City State Zip Code
FRESNO CA 93720-3326

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EYE MEDICAL CLINIC OF FRE-SNO INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956884

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

352.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1902 / 3187
(check only one)

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<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. KEITH ROYAL

Mailing Address 4465 SIRROCCO LN SW

City LILBURN State GA Zip Code 30047-7436

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13939214
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. ANNE RUBIN

Mailing Address 335 CHERRY LN

City WYNNEWOOD State PA Zip Code 19096-1710

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13940791
Amount of Each Receipt this Period: 60.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GRIFF RUBY

Mailing Address 1016 ROCK ROSE LANE

City LOMPOC State CA Zip Code 93436-3265

FEC ID number of contributing federal political committee. **C**

Name of Employer ITT INDUSTRIES/ SYSTEMS DIVISION
Occupation SENIOR TEST ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13940134
Amount of Each Receipt this Period: 60.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 220.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1903 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ROBERT J. RUDOLPH

Mailing Address 5173 N QUAIL CREST DR SE

City	State	Zip Code
GRAND RAPIDS	MI	49546-7510

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
201.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948531

Amount of Each Receipt this Period

101.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. TRACY T. RUDOLPH

Mailing Address 735 MACEDONIA DRIVE

City	State	Zip Code
PUNTA GORDA	FL	33950-8021

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
RETIRED

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943360

Amount of Each Receipt this Period

750.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. ELIZABETH A. RUE

Mailing Address 29482 STINGLEY GULCH RD

City	State	Zip Code
HOTCHKISS	CO	81419-6704

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950732

Amount of Each Receipt this Period

35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

886.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1904 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. LESLIE W. RUE

Mailing Address 317 HILLCREST RD SW

City State Zip Code
AIKEN SC 29801-3717

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955891

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
EUGENE RUEHMANN

Mailing Address 1523 ANDERSON FERRY RD.

City State Zip Code
CINCINNATI OH 45238-3632

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935682

Amount of Each Receipt this Period
240.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES RUFFIN

Mailing Address 4718 FERNWOOD RD

City State Zip Code
COLUMBIA SC 29206-1539

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 1 0

Transaction ID: SA11.13968850

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

290.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1905 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JOSEPH J. RUGANI
Mailing Address P.O. BOX 510395
City State Zip Code
KEY COLONY BEACH FL 33051-0395
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
RETIRED RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00
Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13943881
Amount of Each Receipt this Period: 101.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAMES G. RUGGLES
Mailing Address 101 RAINBOW ST
City State Zip Code
YANKTON SD 57078-4703
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
RETIRED RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 682.00
Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13943670
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES G. RUGGLES
Mailing Address 101 RAINBOW ST
City State Zip Code
YANKTON SD 57078-4703
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
RETIRED RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 682.00
Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13948783
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 181.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1906 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JAMES G. RUGGLES

Mailing Address 101 RAINBOW ST

City State Zip Code
YANKTON SD 57078-4703

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 682.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13949349

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JAMES G. RUGGLES

Mailing Address 101 RAINBOW ST

City State Zip Code
YANKTON SD 57078-4703

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 682.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13951718

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JAMES G. RUGGLES

Mailing Address 101 RAINBOW ST

City State Zip Code
YANKTON SD 57078-4703

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 682.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13951719

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 120.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1907 / 3187

(check only one)

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<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JAMES G. RUGGLES

Mailing Address 101 RAINBOW ST

City State Zip Code
YANKTON SD 57078-4703

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 682.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953664

Amount of Each Receipt this Period

40.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
KENNETH H. RULE

Mailing Address 14 HARBOR ISLAND DR.

City State Zip Code
KEY LARGO FL 33037-5112

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935333

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
STANLEY RUMBOUGH, JR.

Mailing Address 44 COCOANUT ROW

City State Zip Code
PALM BEACH FL 33480-4069

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED INVESTMENTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938813

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

640.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1908 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT H. RUMPF

Mailing Address 51 KENWOOD DRIVE

City State Zip Code
CARLISLE PA 17013-2112

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2010

Transaction ID: SA11.13964771

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. OLIVER F. RUNDE

Mailing Address 305 VILLAGE HEIGHTS DRIVE
APARTMENT 122

City State Zip Code
STATE COLLEGE PA 16801-7690

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 902.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13948533

Amount of Each Receipt this Period
301.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM L. RUNZEL, IV

Mailing Address 2949 PAYNE STREET

City State Zip Code
EVANSTON IL 60201-2062

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LAKE CABLE LLC INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
11 / 18 / 2010

Transaction ID: SA11.13972722

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **5351.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1909 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. CARL RUPE

Mailing Address 3201 MILL POND RD

City State Zip Code
CHARLOTTE NC 28226-6340

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CH PREMIERE HEALTHCARE BUSINESS OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1800.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13960646

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. FRANK J. RUSHEN

Mailing Address 204 AMY CT.

City State Zip Code
STROUDSBURG PA 18360-9166

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 202.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935978

Amount of Each Receipt this Period
1.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. HARVEY L. RUSSELL

Mailing Address 4470 CYCAD LN.

City State Zip Code
BOYNTON BEACH FL 33436-7319

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 341.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944435

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 226.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1910 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. KATHARINE A. RUSSELL

Mailing Address 368 CYPRESS POINT DR.

City State Zip Code
PALM DESERT CA 92211-1713

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
SELF-EMPLOYED WRITER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 279.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942971

Amount of Each Receipt this Period 39.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PATRICIA M. RUSSELL

Mailing Address 98 WESTWOOD DR.

City State Zip Code
FRANKLIN NC 28734-1382

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949064

Amount of Each Receipt this Period 40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PATRICIA M. RUSSELL

Mailing Address 98 WESTWOOD DR.

City State Zip Code
FRANKLIN NC 28734-1382

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 1 0

Transaction ID: SA11.13967382

Amount of Each Receipt this Period 30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 109.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1911 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. R. W. RUSSELL

Mailing Address 9 DEWAR ST

City State Zip Code
BOSTON MA 02125-1542

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JAMES RUIELL ENGINEER MCH ENGINEER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13951703

Amount of Each Receipt this Period
3000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. RICHARD WARREN RUSSELL

Mailing Address 8 PEGAN LANE
P.O. BOX 638

City State Zip Code
DOVER MA 02030-2045

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963519

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
ROBERT C. RUSSELL

Mailing Address 802 KILLION ST

City State Zip Code
LOUISVILLE TN 37777-4407

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936171

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

8100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1912 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
ROBERT J. RUSSELL

Mailing Address 1102 HIGHRIDGE AVE

City State Zip Code
DAYTON OH 45420-3067

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13960276

Amount of Each Receipt this Period

10.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. SHAN T. RUSSELL

Mailing Address 5660 WOODSIDE CIR.

City State Zip Code
MONTGOMERY AL 36117-2601

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955051

Amount of Each Receipt this Period

300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DR. JOSEPH A. RUSSOTTO

Mailing Address 408 MIDLOTHIAN SQ.

City State Zip Code
HAMPTON VA 23669-1747

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 526.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 5 / 2 0 1 0

Transaction ID: SA11.13966212

Amount of Each Receipt this Period

76.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

386.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 1913 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. PAUL J. RUSSO

Mailing Address 222 S MONTICELLO ST

City State Zip Code
WINAMAC IN 46996-1543

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DR PAUL J. RUSSO, D.O. PHYSICIAN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1800.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918418

Amount of Each Receipt this Period
750.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SUSAN M. RUSSO

Mailing Address 180 ALTA VISTA DR.

City State Zip Code
ATHERTON CA 94027-6402

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 655.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13942451

Amount of Each Receipt this Period
405.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID A. RUST

Mailing Address 9450 HOLSEY RD.

City State Zip Code
DAMASCUS MD 20872-2416

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SSA FEDERAL GOVERNMENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953646

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1195.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1914 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DAVID A. RUST

Mailing Address 9450 HOLSEY RD.

City State Zip Code
DAMASCUS MD 20872-2416

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SSA FEDERAL GOVERNMENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961730

Amount of Each Receipt this Period
60.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. SHELVA J. RUSZIN

Mailing Address 1434 BRIXTON RD

City State Zip Code
PASADENA CA 91105-1366

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949250

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. SHELVA J. RUSZIN

Mailing Address 1434 BRIXTON RD

City State Zip Code
PASADENA CA 91105-1366

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 0 / 2 0 1 0

Transaction ID: SA11.13967649

Amount of Each Receipt this Period
85.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 195.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1915 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MATTHEW E. RUTHERFORD

Mailing Address 901 STUART RD

City State Zip Code
WILMINGTON DE 19807-2821

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FLOW IND C.E.O.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957149

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CHARLES C. RUTLEDGE

Mailing Address 7 MIMOSA DR. SE

City State Zip Code
ROME GA 30161-3931

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937011

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOSEPH G. RUTTER

Mailing Address 2250 GOVERNORS BEND RD. SE

City State Zip Code
HUNTSVILLE AL 35801-1371

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940850

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 150.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1916 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOSEPH G. RUTTER

Mailing Address 2250 GOVERNORS BEND RD. SE

City State Zip Code
HUNTSVILLE AL 35801-1371

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956314

Amount of Each Receipt this Period
CONTRIBUTION 50.00

B. Full Name (Last, First, Middle Initial)
MR. DOMENICK T. RUTTURA

Mailing Address 3 MIDDLE HOLLOW RD

City State Zip Code
HUNTINGTON NY 11743-1610

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 1 0

Transaction ID: SA11.13970016

Amount of Each Receipt this Period
CONTRIBUTION 250.00

C. Full Name (Last, First, Middle Initial)
MR. THOMAS A. RUZICKA

Mailing Address 2224 28TH ST

City State Zip Code
ASTORIA NY 11105-2702

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959110

Amount of Each Receipt this Period
CONTRIBUTION 160.00

SUBTOTAL of Receipts This Page (optional) ► 460.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1917 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. ANNE M. RYAN	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 5402 PENNOCK POINT RD.	Transaction ID: SA11.13949674
	City State Zip Code JUPITER FL 33458-3448	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SELF-EMPLOYED MUSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

B.	Full Name (Last, First, Middle Initial) MR. CHARLES J. RYAN	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 66 CARLYLE ROAD	Transaction ID: SA11.13935494
	City State Zip Code PORTLAND ME 04103-3428	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation US AIRWAYS PILOT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

C.	Full Name (Last, First, Middle Initial) MR. JOHN RYAN, III	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 5708 LYNNE HAVEN RD	Transaction ID: SA11.13953941
	City State Zip Code PITTSBURGH PA 15217-1067	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	1125.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1919 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. PAUL W. RYAN

Mailing Address 461 PENDALE ST

City State Zip Code
STATEN ISLAND NY 10306-4054

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953255

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CHARLES RYNEX

Mailing Address 117 LEEDS

City State Zip Code
WILLIAMSBURG VA 23188-9184

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935201

Amount of Each Receipt this Period
150.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID A. SABEY

Mailing Address 12201 TUKWILA INTERNATIONAL BOULEV
4TH FLOOR

City State Zip Code
TUKWILA WA 98168-5121

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13932255

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **5250.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1920 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MARY M. SABINE

Mailing Address 4890 N CLOVERDALE RD. APT. 221

City State Zip Code
BOISE ID 83713-2424

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
221.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934676

Amount of Each Receipt this Period
101.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MORTIMER SACKLER

Mailing Address 15 EAST 62ND STREET

City State Zip Code
NEW YORK NY 10065-7204

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED
Occupation MORTIMER D A SACKLER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13945298

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GLENN H. SACRA

Mailing Address 55 GLEZEN LANE

City State Zip Code
WAYLAND MA 01778-1605

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13960778

Amount of Each Receipt this Period
85.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5186.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1921 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GEORGE E. SAFIOL

Mailing Address 64 JUNIPER RD

City WESTON State MA Zip Code 02493-1358

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1400.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13939614
 Amount of Each Receipt this Period: 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CHARLES E. SAGE

Mailing Address 18433 SE HERITAGE DR

City JUPITER State FL Zip Code 33469-1441

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13946522
 Amount of Each Receipt this Period: 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROLLAND SAGER

Mailing Address 20928 LITTLE LAKE THOMAS RD.

City LAND O LAKES State FL Zip Code 34638-3307

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt: 11 / 02 / 2010
Transaction ID: SA11.13962787
 Amount of Each Receipt this Period: 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 250.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1922 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. GREGORY D. SAHA	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 7519 SHANNONDALE DRIVE	Transaction ID: SA11.13945894
	City State Zip Code SUGAR LAND TX 77479-6443	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation ENGINEER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

B.	Full Name (Last, First, Middle Initial) MR. JOSEPH R. SAILER	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 2014 AANIU LOOP	Transaction ID: SA11.13939542
	City State Zip Code PEARL CITY HI 96782-1310	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

C.	Full Name (Last, First, Middle Initial) MR. ELROY SAILOR	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 14321 DOWDEN DOWN DRIVE	Transaction ID: SA11.13966029
	City State Zip Code HAYMARKET VA 20169-1262	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer G.C.W.C.	Occupation PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	625.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1923 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GEORGE JOHN SAKALDASIS

Mailing Address 1379 LYON CT.

City State Zip Code
LIVERMORE CA 94551-1952

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LAWRENCE LIVERMORE NATIONAL LABORATORY EXECUTIVE STAFF

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 430.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13931801

Amount of Each Receipt this Period
120.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ILJA SAKOTA

Mailing Address 1233 6TH. ST. APT. 1001

City State Zip Code
SANTA MONICA CA 90401-1629

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SMCT ENGINEER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 212.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2010

Transaction ID: SA11.13965667

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. SYED Z. SALAHUDDIN

Mailing Address 1710 DONLON ST STE 6

City State Zip Code
VENTURA CA 93003-5698

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CALIFORNIA INSTITUTE MOLECULAR MEDI PARTNER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2010

Transaction ID: SA11.13962685

Amount of Each Receipt this Period
400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 560.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1924 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOSE L. SALAZAR, SR.
Mailing Address 1179 N MADISON AVE

City State Zip Code
LOS ANGELES CA 90029-1807

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation BUILDING ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949699

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. ROSA M. SALAZAR
Mailing Address 812 NEW DEPOT ST.

City State Zip Code
LOS ANGELES CA 90012-1612

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 391.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931850

Amount of Each Receipt this Period
85.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
EDWARD SALEVSKY
Mailing Address 4852 LOWER MOUNTAIN RD.

City State Zip Code
NEW HOPE PA 18938-9411

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 492.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13945722

Amount of Each Receipt this Period
35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 220.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1925 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
EDWARD SALEVSKY
Mailing Address 4852 LOWER MOUNTAIN RD.
City NEW HOPE State PA Zip Code 18938-9411
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 492.50
Date of Receipt 10 / 21 / 2010
Transaction ID: SA11.13945928
Amount of Each Receipt this Period 25.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
EDWARD SALEVSKY
Mailing Address 4852 LOWER MOUNTAIN RD.
City NEW HOPE State PA Zip Code 18938-9411
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 492.50
Date of Receipt 10 / 21 / 2010
Transaction ID: SA11.13945966
Amount of Each Receipt this Period 40.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
EDWARD SALEVSKY
Mailing Address 4852 LOWER MOUNTAIN RD.
City NEW HOPE State PA Zip Code 18938-9411
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 492.50
Date of Receipt 10 / 21 / 2010
Transaction ID: SA11.13946485
Amount of Each Receipt this Period 25.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 90.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1926 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. THOMAS L. SALIBA

Mailing Address 115 S. VALLEY STREET

City State Zip Code
BURBANK CA 91505-4038

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 11 / 18 / 2010
Transaction ID: SA11.13971347
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NANCY B. SALINAS

Mailing Address 870 VILLA AVE

City State Zip Code
SAN JOSE CA 95126-2439

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13937831
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. EVAN R. SALMORE

Mailing Address 4305 MANGROVE PL

City State Zip Code
SARASOTA FL 34242-1225

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13931876
Amount of Each Receipt this Period: 110.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 250.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1927 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MISS ALICE R. SALVADO

Mailing Address 14056 AURORA DR.

City State Zip Code
SAN LEANDRO CA 94577-5405

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956768

Amount of Each Receipt this Period

30.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
NORA SALVANT

Mailing Address 108 JETT ST.

City State Zip Code
ABERDEEN MS 39730-2912

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 451.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 1 0

Transaction ID: SA11.13972092

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JAMES M. SAMIS

Mailing Address 1114 SHERWOOD LANE
APT B2

City State Zip Code
NICHOLS HILLS OK 73116-6518

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955775

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1080.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1928 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JOHN W. SAMPSON

Mailing Address 9614 PARKWOOD COURT

City State Zip Code
FORT MYERS FL 33908-2861

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956318

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. HARRY E. SAMWAYS

Mailing Address 1333 ARTHUR LN NW APT 312
APARTMENT 312

City State Zip Code
ROCHESTER MN 55901-2095

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Transaction ID: SA11.13968323

Amount of Each Receipt this Period
45.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. DANIEL A. SANCHEZ

Mailing Address 7069 ZUNI CANYON RD

City State Zip Code
GRANTS NM 87020-3764

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HASE AND ASSOCIATES SYSTEMS INC. INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928034

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

645.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1929 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CHARLES R. SANDERS

Mailing Address 6745 STEAMBOAT WAY

City State Zip Code
SACRAMENTO CA 95831-2417

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934181

Amount of Each Receipt this Period
20.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CHARLES R. SANDERS

Mailing Address 6745 STEAMBOAT WAY

City State Zip Code
SACRAMENTO CA 95831-2417

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936222

Amount of Each Receipt this Period
20.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CHARLES R. SANDERS

Mailing Address 6745 STEAMBOAT WAY

City State Zip Code
SACRAMENTO CA 95831-2417

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937333

Amount of Each Receipt this Period
20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 60.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1930 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. CHARLES R. SANDERS	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	Mailing Address 6745 STEAMBOAT WAY	Transaction ID: SA11.13952444
	City State Zip Code SACRAMENTO CA 95831-2417	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 680.00	

B.	Full Name (Last, First, Middle Initial) MR. CHARLES R. SANDERS	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	Mailing Address 6745 STEAMBOAT WAY	Transaction ID: SA11.13953266
	City State Zip Code SACRAMENTO CA 95831-2417	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 680.00	

C.	Full Name (Last, First, Middle Initial) MR. JOSEPH N. SANDERS, JR.	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 1 0
	Mailing Address 2010 LITTLEMORE DR.	Transaction ID: SA11.13956232
	City State Zip Code CORDOVA TN 38016-5265	Amount of Each Receipt this Period 1.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation CK SANDERS INCORPORATED GOLF COURSE CONTRACTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 961.00	

SUBTOTAL of Receipts This Page (optional)	41.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1931 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. JOSEPH N. SANDERS, JR.	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 2010 LITTLEMORE DR.	Transaction ID: SA11.13956400
	City State Zip Code CORDOVA TN 38016-5265	Amount of Each Receipt this Period 320.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer CK SANDERS INCORPORATED	Occupation GOLF COURSE CONTRACTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 961.00	

B.	Full Name (Last, First, Middle Initial) MR. MARK J. SANDERS	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 14922 CERRITOS PL	Transaction ID: SA11.13931827
	City State Zip Code FONTANA CA 92336-5541	Amount of Each Receipt this Period 310.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SANDERS CANDY FACTORY	Occupation VICE PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00	

C.	Full Name (Last, First, Middle Initial) MRS. PATRICIA SANDERS	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 205 TURNBERRY CIR.	Transaction ID: SA11.13952447
	City State Zip Code FAYETTEVILLE GA 30215-2758	Amount of Each Receipt this Period 55.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional)	685.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1932 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
WILBURN P. SANDERS

Mailing Address P.O. BOX 16003

City State Zip Code
HUNTSVILLE AL 35802-1649

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
THE HUNTSVILLE TIMES RACK DISTRIBUTION SALES

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 630.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957197

Amount of Each Receipt this Period
20.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. EDWIN C. SANDHAM

Mailing Address 1964 SW SAINT ANDREWS DR.

City State Zip Code
PALM CITY FL 34990-2210

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2251.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933302

Amount of Each Receipt this Period
101.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. EDWIN C. SANDHAM

Mailing Address 1964 SW SAINT ANDREWS DR.

City State Zip Code
PALM CITY FL 34990-2210

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2251.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948919

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 321.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1933 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. EDWIN C. SANDHAM

Mailing Address 1964 SW SAINT ANDREWS DR.

City State Zip Code
PALM CITY FL 34990-2210

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2251.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952958

Amount of Each Receipt this Period
300.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. EDWIN C. SANDHAM

Mailing Address 1964 SW SAINT ANDREWS DR.

City State Zip Code
PALM CITY FL 34990-2210

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2251.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954481

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. EDWIN C. SANDHAM

Mailing Address 1964 SW SAINT ANDREWS DR.

City State Zip Code
PALM CITY FL 34990-2210

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2251.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963463

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 700.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1934 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
BARBARA L. SANDOR

Mailing Address 400 S STEELE ST UNIT 68
UNIT 68

City State Zip Code
DENVER CO 80209-3537

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948528

Amount of Each Receipt this Period
101.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. THOMAS SANDO

Mailing Address 1214 OWL CREEK RANCH RD.

City State Zip Code
ASPEN CO 81611-3311

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946843

Amount of Each Receipt this Period
150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. CONNIE SANDVIK

Mailing Address 601 CHURCHILL DR

City State Zip Code
SAINT GEORGE UT 84790-7416

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
345.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928878

Amount of Each Receipt this Period
35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **286.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1935 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM D. SANFORD

Mailing Address 97 COUNTY RD 519

City State Zip Code
NEWTON NJ 07860-6237

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 211.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959528

Amount of Each Receipt this Period
35.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
EDWIN C. SANHAM

Mailing Address 1964 SW SAINT ANDREWS DR.

City State Zip Code
PALM CITY FL 34990-2210

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963464

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
EDWIN C. SANHAM

Mailing Address 1964 SW SAINT ANDREWS DR.

City State Zip Code
PALM CITY FL 34990-2210

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 7 / 2 0 1 0

Transaction ID: SA11.13969857

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

235.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1936 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. BARRY SANKEY

Mailing Address 908 MUHLENBERG DR

City State Zip Code
TRAPPE PA 19426-2275

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FINIX NEW JOURNALIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13929407

Amount of Each Receipt this Period
75.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GEORGE E. SANNER

Mailing Address 2501 HIDDEN HILLS DR.

City State Zip Code
MARIETTA GA 30066-5241

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UNEMPLOYED UNEMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2010

Transaction ID: SA11.13956341

Amount of Each Receipt this Period
10.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. CARMEN LAMCO SANTOS

Mailing Address 10146 CEDARVALE DR

City State Zip Code
SAN ANTONIO TX 78245-1060

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13952473

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **135.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1937 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. CARMEN LAMCO SANTOS

Mailing Address 10146 CEDARVALE DR

City State Zip Code
SAN ANTONIO TX 78245-1060

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 330.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953188

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. RICHARD T. SANTULLI

Mailing Address 140 SWIMMING RIVER ROAD

City State Zip Code
COLTS NECK NJ 07722-1581

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
THE MILESTONE AVIATION GR- OUP LLC CEO

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 2400.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 5 / 2 0 1 0

Transaction ID: SA11.13966051

Amount of Each Receipt this Period

2400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
CARMEN L. SANVICTORES

Mailing Address 2232 LONGWORTHY RD.

City State Zip Code
NORTH PORT FL 34288-7633

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940156

Amount of Each Receipt this Period

30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2455.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1938 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. B. W. SAPP

Mailing Address 4281 GOLDEN ISLE W

City State Zip Code
BAXLEY GA 31513-7934

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13936468

Amount of Each Receipt this Period
1.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JOHN B. SARDISCO

Mailing Address 18536 S. MISSION HILLS AVENUE

City State Zip Code
BATON ROUGE LA 70810-7923

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
MM / DD / YYYY
11 / 05 / 2010

Transaction ID: SA11.13966271

Amount of Each Receipt this Period
85.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. DAVID H. SARTEN

Mailing Address 46 SARTEN ROAD

City State Zip Code
FULTON KY 42041-6413

FEC ID number of contributing federal political committee. **C**

Name of Employer TRI-STATE GAS
Occupation PROPANE GAS RETAILER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13943006

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **336.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1939 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DONALD RAY SARVER

Mailing Address 981 CAMPBELL LN. # 121

City State Zip Code
BOWLING GREEN KY 42104-4136

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948775

Amount of Each Receipt this Period
30.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. BARBARA A. SAS

Mailing Address 43390 RUSSIA RD

City State Zip Code
ELYRIA OH 44035-6864

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 215.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13965010

Amount of Each Receipt this Period
15.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. BARBARA W. SASSER

Mailing Address 7221 BROADWAY ST

City State Zip Code
GALVESTON TX 77554-8915

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED COMMUNITY VOLUNTEER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933936

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 145.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1940 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. PATRICIA L. SATORIUS

Mailing Address 17738 LA ROSA LN

City State Zip Code
FOUNTAIN VLY CA 92708-4818

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 475.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13969168

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DR. BENTON S. SATTERFIELD

Mailing Address 2801 BLUE RIDGE RD
STE G50

City State Zip Code
RALEIGH NC 27607-6490

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BENTON S. SATTERFIELD MD, PA PHYSICIAN

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 550.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13947808

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
LEE SATTERFIELD

Mailing Address 1412 S TOMAHAWK LANE

City State Zip Code
OLATHE KS 66062-3206

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 201.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953553

Amount of Each Receipt this Period

101.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

351.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1941 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. FREDERIC G. SAUER

Mailing Address **1657 FOREST VIEW DR.**

City **SAINT LOUIS** State **MO** Zip Code **63122-1721**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ORION INVESTMENT CO.** Occupation **INVESTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **10 / 20 / 2010**

Transaction ID: SA11.13945242

Amount of Each Receipt this Period **1000.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. VICTORIA F. SAUER

Mailing Address **4634 BUTTE RD**

City **RICHMOND** State **VA** Zip Code **23235-1510**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **10 / 26 / 2010**

Transaction ID: SA11.13951320

Amount of Each Receipt this Period **200.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. KENNETH SAVAGE

Mailing Address **1403 RICHARD AVE**

City **PARSONS** State **KS** Zip Code **67357-4733**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **276.00**

Date of Receipt **10 / 25 / 2010**

Transaction ID: SA11.13952838

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1300.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1942 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JON SAVOIE

Mailing Address 18021 HARBOUR TOWN COURT

City State Zip Code
BATON ROUGE LA 70810-7988

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941835

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PETER A. SAWAY

Mailing Address 2712 WATKINS GLEN DR

City State Zip Code
VESTAVIA AL 35216-1044

FEC ID number of contributing federal political committee. **C**

Name of Employer RHEUMATOLOGY ASSOCIATES PC
Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13957900

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ALLAN W. SAWTELLE

Mailing Address 11120 SPRINGFIELD PIKE APT A406
APARTMENT A406

City State Zip Code
CINCINNATI OH 45246-4187

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944729

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **175.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1943 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. ALLAN W. SAWTELLE	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 11120 SPRINGFIELD PIKE APT A406 APARTMENT A406	Transaction ID: SA11.13948995
	City CINCINNATI State OH Zip Code 45246-4187	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 225.00	

B.	Full Name (Last, First, Middle Initial) MR. BRYON R. SAWYER	Date of Receipt MM / DD / YYYY 11 / 08 / 2010
	Mailing Address P.O. BOX 311442	Transaction ID: SA11.13966607
	City NEW BRAUNFELS State TX Zip Code 78131-1442	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 250.00	

C.	Full Name (Last, First, Middle Initial) MR. RONALD L. SAWYER	Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address 1819 MILFORD ST	Transaction ID: SA11.13960746
	City HOUSTON State TX Zip Code 77098-5409	Amount of Each Receipt this Period 305.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer SAWYER DRILLING & SERVICE, LLC Occupation PRESIDENT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 915.00	

SUBTOTAL of Receipts This Page (optional)	505.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1944 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. BETTY Y. SBORDONE

Mailing Address 30 H ST

City State Zip Code
SEASIDE PARK NJ 08752-1521

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2010

Transaction ID: SA11.13962510

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. CHARLOTTE S. SCALES

Mailing Address 912 MOUNTAIN TOP DRIVE

City State Zip Code
MARIETTA GA 30062-3201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
11 / 12 / 2010

Transaction ID: SA11.13968233

Amount of Each Receipt this Period
75.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. SIMONE A. SCALES

Mailing Address 67948 PICKERING RD

City State Zip Code
SAINT CLAIRSVILLE OH 43950-9722

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13949084

Amount of Each Receipt this Period
20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 195.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1945 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. MARION SCANIO		Date of Receipt
	Mailing Address 4022 OCEAN DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 12 / 2010
	City	State	Zip Code
	CRP CHRISTI	TX	78411-1222
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13968049
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MR. ARTHUR G. SCANLAN, II		Date of Receipt
	Mailing Address 913 SOUTH BURNSIDE AVENUE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 27 / 2010
	City	State	Zip Code
	GONZALES	LA	70737-4258
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13959336
Name of Employer EATEL		Occupation OWNER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 6000.00
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MISS MARGUERITE S. SCARANE		Date of Receipt
	Mailing Address 15855 MIAMI LAKEWAY N APT 149E		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 28 / 2010
	City	State	Zip Code
	MIAMI LAKES	FL	33014-2154
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13957690
Name of Employer FLORIDA DEPT.OF CORRECTI- ONS		Occupation POLICE OFFICER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 85.00
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1585.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1946 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. FORREST A. SCARBOROUGH	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 203 GRANDVIEW	Transaction ID: SA11.13931745
	City Kingsland State TX Zip Code 78639-4349	Amount of Each Receipt this Period 110.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 270.00		

B.	Full Name (Last, First, Middle Initial) MR. MICHAEL P. SCAROLA	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 23 CLIFFORD CT.	Transaction ID: SA11.13946226
	City Malverne State NY Zip Code 11565-1306	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 805.00		

C.	Full Name (Last, First, Middle Initial) MR. GAIL H. SCHADT	Date of Receipt MM / DD / YYYY 10 / 29 / 2010
	Mailing Address 925 EASTGLEN DR	Transaction ID: SA11.13959181
	City La Verne State CA Zip Code 91750-1832	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		

SUBTOTAL of Receipts This Page (optional)	▶	235.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1947 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JEAN H. SCHAEER

Mailing Address 45 FULLIN RD

City State Zip Code
NORWALK CT 06851-3416

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958488

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. NELSON SCHAEENEN, JR.

Mailing Address 56 MIDWOOD TERRACE

City State Zip Code
MADISON NJ 07940-2735

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943234

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ORVILLE L. SCHAEFER

Mailing Address 218 SMITH ST

City State Zip Code
PERRYVILLE MO 63775-1927

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957263

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

560.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1948 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) L. SCHAFER	Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address P.O. BOX 219	Transaction ID: SA11.13963935
	City State Zip Code MEADOW VISTA CA 95722-0219	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 351.00	

B.	Full Name (Last, First, Middle Initial) HENRY J. SCHANK	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 4032 SPYGLASS RD.	Transaction ID: SA11.13954875
	City State Zip Code OKLAHOMA CITY OK 73120-8866	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation USAF ENGINEER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 651.00	

C.	Full Name (Last, First, Middle Initial) HENRY J. SCHANK	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 4032 SPYGLASS RD.	Transaction ID: SA11.13959601
	City State Zip Code OKLAHOMA CITY OK 73120-8866	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation USAF ENGINEER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 651.00	

SUBTOTAL of Receipts This Page (optional)	450.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1949 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JEFFREY SCHANTZ

Mailing Address 1257 VEEDER DR

City State Zip Code
HEWLETT NY 11557-2512

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HEWLETT BAY ASSOCIATES LLC SELF-EMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13948167

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM A. SCHANK

Mailing Address 1601 UNION AVE

City State Zip Code
BEATRICE NE 68310-1428

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959831

Amount of Each Receipt this Period
20.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. PAULINE M. SCHARRES

Mailing Address 1287 SAINT COLETTE CT

City State Zip Code
LEMONT IL 60439-2707

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 335.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931587

Amount of Each Receipt this Period
110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **2630.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1950 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. DIANE H. SCHATZ

Mailing Address 4510 19TH AVENUE SW

City State Zip Code
FARGO ND 58103

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	1	0

Transaction ID: SA11.13946635

Amount of Each Receipt this Period
375.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. DIANE H. SCHATZ

Mailing Address 4510 19TH AVENUE SW

City State Zip Code
FARGO ND 58103

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	1	0

Transaction ID: SA11.13971987

Amount of Each Receipt this Period
375.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ELEANOR SCHAUBEL

Mailing Address 411 MESA LILA RD.

City State Zip Code
GLENDALE CA 91208-1038

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
251.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	1	0

Transaction ID: SA11.13960121

Amount of Each Receipt this Period
51.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **801.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1951 / 3187
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ELEANOR SCHAUBEL

Mailing Address 411 MESA LILA RD.

City State Zip Code
GLENDALE CA 91208-1038

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961270

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SHELBY G. SCHAVOIR

Mailing Address 2 MARSH BRIDGE LN

City State Zip Code
SAVANNAH GA 31411-2946

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 975.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955783

Amount of Each Receipt this Period
360.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. LINDA M. SCHECKLER

Mailing Address 1333 OLD ROUTE 8

City State Zip Code
POLK PA 16342-2121

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957332

Amount of Each Receipt this Period
35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **445.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1952 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. LINDA M. SCHECKLER	Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address 1333 OLD ROUTE 8	Transaction ID: SA11.13963583
	City POLK State PA Zip Code 16342-2121	Amount of Each Receipt this Period 26.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 226.00	

B.	Full Name (Last, First, Middle Initial) MR. GARY K. SCHEIG	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 19315 54TH AVE SW	Transaction ID: SA11.13928043
	City DES LACS State ND Zip Code 58733-9437	Amount of Each Receipt this Period 110.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 370.00	

C.	Full Name (Last, First, Middle Initial) JAY SCHEIDEMAN	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 3558 DOROTHY LN N	Transaction ID: SA11.13949500
	City FORT WORTH State TX Zip Code 76107-1745	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional)	236.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1953 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT SCHEIBAL

Mailing Address 14 HARVEST PT

City State Zip Code
COLLINSVILLE IL 62234-6869

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951598

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. KURT O. SCHELLE

Mailing Address P.O. BOX 210364

City State Zip Code
AUKER BAY AK 99821-0364

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
STATE OF ALASKA ECONOMIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961395

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MICHAEL GERARD SCHELL

Mailing Address 12719 AVENS ARBOR

City State Zip Code
SAN ANTONIO TX 78253-5489

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
US GOVERNMENT HEALTH ADMINISTRATION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938781

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **325.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1954 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ARTHUR C. SCHENCK

Mailing Address 9614 NORTH ST BOX 47

City WATTSBURG State PA Zip Code 16442

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
11 / 08 / 2010

Transaction ID: SA11.13966740

Amount of Each Receipt this Period
300.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. JOHN SCHENCK

Mailing Address 22 E. CLAREMONT DRIVE

City VOORHEESVILLE State NY Zip Code 12186-9104

FEC ID number of contributing federal political committee. **C**

Name of Employer GENERAL ELECTRIC
Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13929167

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. BARRY J. SCHERESKY

Mailing Address 19810 37TH AVENUE SW

City DES LACS State ND Zip Code 58733-9458

FEC ID number of contributing federal political committee. **C**

Name of Employer SCHERESKY FARMS
Occupation FARMER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2010

Transaction ID: SA11.13951227

Amount of Each Receipt this Period
75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **425.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1955 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. DANIEL E. SCHERDT

Mailing Address 1478 COLUMBUS RD

City State Zip Code
WEST SACRAMENTO CA 95691-4918

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PILOT OFFICER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 725.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 1 0

Transaction ID: SA11.13928684

Amount of Each Receipt this Period

75.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. DANIEL E. SCHERDT

Mailing Address 1478 COLUMBUS RD

City State Zip Code
WEST SACRAMENTO CA 95691-4918

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PILOT OFFICER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 725.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13960651

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. GEORGE SCHERER

Mailing Address 606 LOUGHMOR PASS

City State Zip Code
WELDON SPRING MO 63304-0504

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13942466

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1956 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. LYNDELL J. SCHICK

Mailing Address 320 QUIGLEY RD

City PENSACOLA State FL Zip Code 32506-5650

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt: 11 / 08 / 2010
Transaction ID: SA11.13966977
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DON A. SCHIEMANN

Mailing Address 110 BALDWIN ROAD

City BIRMINGHAM State MI Zip Code 48009-1356

FEC ID number of contributing federal political committee. **C**

Name of Employer TK HOLDINGS INC Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 11 / 12 / 2010
Transaction ID: SA11.13968147
Amount of Each Receipt this Period: 500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JUNE F. SCHILLER

Mailing Address 863 GARLAND DR

City PALO ALTO State CA Zip Code 94303-3606

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 11 / 02 / 2010
Transaction ID: SA11.13964788
Amount of Each Receipt this Period: 200.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **725.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1957 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. CORINNE R. SCHINDLER

Mailing Address 2715 WEST DALE RD. NW

City State Zip Code
CANTON OH 44708-1246

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957034

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. CORINNE R. SCHINDLER

Mailing Address 2715 WEST DALE RD. NW

City State Zip Code
CANTON OH 44708-1246

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957139

Amount of Each Receipt this Period
51.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOHN L. SCHIPPER

Mailing Address 1802 101ST. PL. NE

City State Zip Code
BELLEVUE WA 98004-2732

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959594

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 201.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1958 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JOHN L. SCHIPPER
Mailing Address 1802 101ST. PL. NE

City State Zip Code
BELLEVUE WA 98004-2732

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 301.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959659

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHN L. SCHIPPER
Mailing Address 1802 101ST. PL. NE

City State Zip Code
BELLEVUE WA 98004-2732

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 301.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13960046

Amount of Each Receipt this Period
1.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. DANIELLE G. SCHLEI
Mailing Address 4352 LYCEUM AVE

City State Zip Code
LOS ANGELES CA 90066-6104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NOTRE DAME ACADEMY TEACHER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 280.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938529

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 151.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1959 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. GERALD W. SCHLIEF	Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address 5773 WOODWAY DR. #800	Transaction ID: SA11.13961154
	City State Zip Code HOUSTON TX 77057-1501	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation ATP OIL & GAS CORPORATION CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

B.	Full Name (Last, First, Middle Initial) MR. GERALD W. SCHLIEF	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 5773 WOODWAY DR. #800	Transaction ID: SA11.13964536
	City State Zip Code HOUSTON TX 77057-1501	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation ATP OIL & GAS CORPORATION CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

C.	Full Name (Last, First, Middle Initial) MR. MERVYN SCHLIEFERT	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 1 CAMELOT WAY	Transaction ID: SA11.13942565
	City State Zip Code KEARNEY NE 68845-4246	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 291.00	

SUBTOTAL of Receipts This Page (optional)	850.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1960 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. PHILLIP SCHLOSS

Mailing Address 17715 SHAKER BLVD

City State Zip Code
CLEVELAND OH 44120-1745

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JO BAR MANUFACTURING OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952050

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BYRON W. SCHMIDT

Mailing Address 720 HEATHROW AVE

City State Zip Code
LADY LAKE FL 32159-6200

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950206

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. BYRON W. SCHMIDT

Mailing Address 720 HEATHROW AVE

City State Zip Code
LADY LAKE FL 32159-6200

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961748

Amount of Each Receipt this Period
30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **255.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1961 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. HARRY J. SCHMIDT	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 7100 E BELLEVIEW AVE STE 307	Transaction ID: SA11.13934990
	City State Zip Code GREENWOOD VILLAGE CO 80111-1636	Amount of Each Receipt this Period 375.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SCHMIDTT ASSOCIATES CPA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	

B.	Full Name (Last, First, Middle Initial) MRS. JACQUELINE R. SCHMIDT	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 1315 NATIONAL RD APT 107	Transaction ID: SA11.13954288
	City State Zip Code WHEELING WV 26003-5467	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

C.	Full Name (Last, First, Middle Initial) MR. JEFFREY SCHMIDT	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 2512 RALEIGH RD	Transaction ID: SA11.13931816
	City State Zip Code HUMMELSTOWN PA 17036-7079	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

SUBTOTAL of Receipts This Page (optional)	505.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1962 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. LILLIAN J. SCHMIDT

Mailing Address 9359 SCHMIDT CIRCLE

City State Zip Code
WEST JORDAN UT 84088-8778

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation AGRICULTURE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	9	/	2	0	1	0

Transaction ID: SA11.13959071

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LOUIS A. SCHMITT, JR.

Mailing Address 2122 ROSWELL AVENUE

City State Zip Code
CHARLOTTE NC 28207-2737

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13934837

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MAX J. SCHMID

Mailing Address 1249 NE 5TH. AVE

City State Zip Code
CAMAS WA 98607-1320

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 320.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13936815

Amount of Each Receipt this Period

80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

180.00

TOTAL This Period (last page this line number only) ►

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**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1963 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MAX J. SCHMID

Mailing Address 1249 NE 5TH. AVE

City State Zip Code
CAMAS WA 98607-1320

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952841

Amount of Each Receipt this Period

80.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. RAYMOND P. SCHMIDT

Mailing Address 6205 LONE OAK DR

City State Zip Code
BETHESDA MD 20817-1743

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
U S NAVY U S CIVIL SERVANT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930571

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. RICHARD SCHMIDT

Mailing Address 12136 W 75TH LN

City State Zip Code
ARVADA CO 80005-5306

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918485

Amount of Each Receipt this Period

105.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

285.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1964 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RICHARD SCHMIDT

Mailing Address 11782 LOMA LINDA WAY

City State Zip Code
SANTA ANA CA 92705-3033

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SUNDSTROOR E SCHORID ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
MM / DD / YYYY
11 / 09 / 2010

Transaction ID: SA11.13966567

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SANDRA JEAN SCHMIDT

Mailing Address 19 TURKEY DR

City State Zip Code
HARPER TX 78631-9350

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 481.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13948535

Amount of Each Receipt this Period
61.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SANDRA JEAN SCHMIDT

Mailing Address 19 TURKEY DR

City State Zip Code
HARPER TX 78631-9350

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 481.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13948609

Amount of Each Receipt this Period
60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 221.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1965 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. NORMAN SCHMUTTER

Mailing Address **485 CHURCHILL RD**

City **TEANECK** State **NJ** Zip Code **07666-2904**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BSYD CORPORATION** Occupation **BUSINESSMAN**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **10 / 21 / 2010**

Transaction ID: SA11.13946918

Amount of Each Receipt this Period **200.00**

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. THOMAS R. SCHMUHL

Mailing Address **283 MELROSE AVENUE**

City **MERION STATION** State **PA** Zip Code **19066-1748**

FEC ID number of contributing federal political committee. **C**

Name of Employer **DVONNE MORRIS LLP** Occupation **ATTORNEY**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **535.00**

Date of Receipt **10 / 18 / 2010**

Transaction ID: SA11.13934852

Amount of Each Receipt this Period **75.00**

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. THOMAS R. SCHMUHL

Mailing Address **283 MELROSE AVENUE**

City **MERION STATION** State **PA** Zip Code **19066-1748**

FEC ID number of contributing federal political committee. **C**

Name of Employer **DVONNE MORRIS LLP** Occupation **ATTORNEY**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **535.00**

Date of Receipt **10 / 20 / 2010**

Transaction ID: SA11.13943411

Amount of Each Receipt this Period **25.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **300.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1966 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) LZND A F. SCHNACKENBERG		Date of Receipt
	Mailing Address 128 HOLLY RIDGE LN.		<input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	WEST COLUMBIA	SC	29169-3755
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer HOMEMAKER		Occupation HOMEMAKER	Transaction ID: SA11.13946211
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="240.00"/>	Amount of Each Receipt this Period <input type="text" value="80.00"/>
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MR. CARL RANDALL SCHNEIDER		Date of Receipt
	Mailing Address 12560 SARATOGA CREEK DRIVE		<input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	SARATOGA	CA	95070-3569
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer RETIRED		Occupation RETIRED	Transaction ID: SA11.13945190
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	Amount of Each Receipt this Period <input type="text" value="100.00"/>
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) CLINTON SCHNEIDER		Date of Receipt
	Mailing Address 20 CARAVELLE LN		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	BLUFFTON	SC	29909-4328
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer RETIRED		Occupation RETIRED	Transaction ID: SA11.13963019
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="249.00"/>	Amount of Each Receipt this Period <input type="text" value="25.00"/>
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="205.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1967 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. REBA S. SCHNEIDERMAN

Mailing Address 2146 ORCHARD MIST ST

City State Zip Code
LAS VEGAS NV 89135-1562

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
380.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931652

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ROD SCHNEIDMILLER

Mailing Address 6716 S SADDLE RIDGE ROAD

City State Zip Code
GREENACRES WA 99016-7716

FEC ID number of contributing federal political committee. **C**

Name of Employer
STERLING INTERNATIONAL,
INC.

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
OWNER

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13892012B

Amount of Each Receipt this Period

-10000.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO RECOUNT
FUND

C.

Full Name (Last, First, Middle Initial)
MR. STEVEN SCHNEIDER

Mailing Address 2700 N CENTRAL AVE STE 890

City State Zip Code
PHOENIX AZ 85004-1141

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938608

Amount of Each Receipt this Period

175.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

275.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1968 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. WILLIAM SCHNEIDER		Date of Receipt																					
	Mailing Address 7508 VIDA AVE		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	0		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0		2	0		2	0	1	0														
	City State Zip Code VILLAGE OF LAKEWOOD IL 60014-6630		Transaction ID: SA11.13943355																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00																						
Name of Employer DR. MEO SCHNEIDER & ASSOC.		Occupation PENSION CONSULTANT																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00																						
CONTRIBUTION																								

B.	Full Name (Last, First, Middle Initial) MR. CLIFFORD J. SCHNIEDERS		Date of Receipt																					
	Mailing Address 1020 BOONVILLE RD		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	3		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	1		0	3		2	0	1	0														
	City State Zip Code JEFFERSON CITY MO 65109-0620		Transaction ID: SA11.13964438																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00																						
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00																						
CONTRIBUTION																								

C.	Full Name (Last, First, Middle Initial) COLE SCHNORF		Date of Receipt																					
	Mailing Address 4912 VALLEY VIEW OVERLOOK		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	4		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0		1	4		2	0	1	0														
	City State Zip Code ELLICOTT CITY MD 21042-6276		Transaction ID: SA11.13930473																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00																						
Name of Employer MANEKA LLC		Occupation REAL ESTATE DEVELOPER																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00																						
CONTRIBUTION																								

SUBTOTAL of Receipts This Page (optional)	▶	270.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1969 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
COLE SCHNORF

Mailing Address 4912 VALLEY VIEW OVERLOOK

City State Zip Code
ELLICOTT CITY MD 21042-6276

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MANEKA LLC REAL ESTATE DEVELOPER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946230

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. JANE E. SCHOENHERR

Mailing Address 6167 E. HAWKS NEST PLACE

City State Zip Code
TUCSON AZ 85750-2094

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939825

Amount of Each Receipt this Period
1.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. JANE E. SCHOENHERR

Mailing Address 6167 E. HAWKS NEST PLACE

City State Zip Code
TUCSON AZ 85750-2094

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940827

Amount of Each Receipt this Period
150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **251.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1970 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. LEE E. SCHOEFFLER

Mailing Address 7171 S. YALE AVENUE
SUITE 103

City TULSA State OK Zip Code 74136-6367

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation DOCTOR

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 01 / 2010
Transaction ID: SA11.13965481
Amount of Each Receipt this Period 300.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ECKARD SCHOLTZ

Mailing Address 9630 IDLEWOOD DR.

City CLEVELAND State OH Zip Code 44144-3121

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 470.00

Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13935719
Amount of Each Receipt this Period 30.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ECKARD SCHOLTZ

Mailing Address 9630 IDLEWOOD DR.

City CLEVELAND State OH Zip Code 44144-3121

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 470.00

Date of Receipt 10 / 21 / 2010
Transaction ID: SA11.13946472
Amount of Each Receipt this Period 10.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 340.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1971 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ECKARD SCHOLTZ

Mailing Address 9630 IDLEWOOD DR.

City State Zip Code
CLEVELAND OH 44144-3121

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
MM / DD / YYYY
11 / 16 / 2010

Transaction ID: SA11.13969181

Amount of Each Receipt this Period
10.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GERRIT J. SCHOLTEN

Mailing Address 6858 E VIA DORADO

City State Zip Code
TUCSON AZ 85715-4821

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
10 / 20 / 2010

Transaction ID: SA11.13938458

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GERRIT J. SCHOLTEN

Mailing Address 6858 E VIA DORADO

City State Zip Code
TUCSON AZ 85715-4821

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
11 / 20 / 2010

Transaction ID: SA11.13971525

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 60.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1972 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. DUAINÉ SCHONEWEIS

Mailing Address P.O. BOX 155

City State Zip Code
MEDFORD OK 73759-0155

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED FARMER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13969204

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ERIK A. SCHONBERG

Mailing Address 3014 GREENDALE DR NW

City State Zip Code
ATLANTA GA 30327-1609

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 370.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955908

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
RONALD SCHONGAR

Mailing Address 1909 LUCINA CT

City State Zip Code
FORT MYERS FL 33908-1608

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 330.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950229

Amount of Each Receipt this Period

220.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

470.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1973 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ANNA SCHOON

Mailing Address 5 E 8TH. ST.

City State Zip Code
HOLLAND MI 49423-3501

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936649

Amount of Each Receipt this Period
1.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CHARLES SCHOONOVER

Mailing Address 5433 GUNBARREL CIR

City State Zip Code
LANGMONT CO 80503-8603

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
IBM PROGRAMMER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 1 0

Transaction ID: SA11.13965197

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CHESTER K. SCHOONMAKER

Mailing Address P.O. BOX 472
IVY RD.

City State Zip Code
SHRUB OAK NY 10588-0472

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948812

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 301.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1974 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. BETTY J. SCHREINER

Mailing Address 119 CROWN ROAD

City State Zip Code
KENTFIELD CA 94904-2705

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	8	/	2	0	1	0

Transaction ID: SA11.13971460

Amount of Each Receipt this Period
75.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. NELSON R. SCHREIBER

Mailing Address PO BOX 447

City State Zip Code
ROUND HILL VA 20142-0447

FEC ID number of contributing federal political committee. **C**

Name of Employer NELSON SCHREIBER
Occupation MARKETING OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	6	/	2	0	1	0

Transaction ID: SA11.13951495

Amount of Each Receipt this Period
110.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HENRY G. SCHRIEVER

Mailing Address 9 SANDY COVE LN.

City State Zip Code
BEACH HAVEN NJ 08008-6154

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	1	0

Transaction ID: SA11.13963148

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **285.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1975 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. DONALD R. SCHROETER	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 610 ANCHORAGE LN	Transaction ID: SA11.13934977
	City State Zip Code HOUSTON TX 77079-2538	Amount of Each Receipt this Period 90.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) MS. JANET EILEEN SCHRODER	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 75450 ROAD 330	Transaction ID: SA11.13944316
	City State Zip Code GRANT NE 69140-3330	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 516.00	

C.	Full Name (Last, First, Middle Initial) MR. KENNETH L. SCHROEDER	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 14545 MANUELLA RD	Transaction ID: SA11.13928407
	City State Zip Code LOS ALTOS HILLS CA 94022-2024	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation K.L.A.- TENCOR C.E.O.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00	

SUBTOTAL of Receipts This Page (optional)	▶	2590.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1976 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. R A. SCHROCK

Mailing Address 1007 MAPLEWOOD DR

City State Zip Code
WAKARUSA IN 46573-9736

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
680.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	6	/	2	0	1	0

Transaction ID: SA11.13956084

Amount of Each Receipt this Period
20.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RAYMOND M. SCHROCK

Mailing Address 25652 STATE ROAD 119

City State Zip Code
GOSHEN IN 46526-7457

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED
Occupation FARM STORE OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1051.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	1	0

Transaction ID: SA11.13943588

Amount of Each Receipt this Period
350.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM W. SCHRODER

Mailing Address 600 DOMENICO CIR
UNIT G12

City State Zip Code
ST AUGUSTINE FL 32086-7823

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	1	0

Transaction ID: SA11.13946057

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **395.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1977 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MARVIN SCHUCK

Mailing Address **610 W SHORE DRIVE**

City **WORTHINGTON** State **MN** Zip Code **56187-3009**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **452.00**

Date of Receipt **10 / 25 / 2010**

Transaction ID: SA11.13953623

Amount of Each Receipt this Period **41.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MARVIN SCHUCK

Mailing Address **610 W SHORE DRIVE**

City **WORTHINGTON** State **MN** Zip Code **56187-3009**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **452.00**

Date of Receipt **10 / 25 / 2010**

Transaction ID: SA11.13955263

Amount of Each Receipt this Period **45.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. MARGARET A. SCHUHMAN

Mailing Address **1622 DAUPHIN AVENUE**

City **WYOMISSING** State **PA** Zip Code **19610-2314**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1350.00**

Date of Receipt **10 / 19 / 2010**

Transaction ID: SA11.13931519

Amount of Each Receipt this Period **500.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **586.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1978 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. MARGARET I. SCHUH

Mailing Address 3348 BLOSSOM LN.

City State Zip Code
N TONAWANDA NY 14120-1272

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 501.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932892

Amount of Each Receipt this Period
51.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. EVAN SCHULMAN

Mailing Address 69 MOUNT VERNON ST

City State Zip Code
BOSTON MA 02108-1330

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931744

Amount of Each Receipt this Period
105.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GLENN V. SCHULTZ

Mailing Address 615 THREE EAGLES ST

City State Zip Code
COLORADO SPRINGS CO 80905-2474

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940223

Amount of Each Receipt this Period
55.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **211.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1979 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. GLENN V. SCHULTZ	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 615 THREE EAGLES ST	Transaction ID: SA11.13941348
	City State Zip Code COLORADO SPRINGS CO 80905-2474	Amount of Each Receipt this Period 35.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00	

B.	Full Name (Last, First, Middle Initial) MR. DENNIS J. SCHUMANN	Date of Receipt MM / DD / YYYY 11 / 15 / 2010
	Mailing Address 1347 JANUARY AVE	Transaction ID: SA11.13968858
	City State Zip Code SAINT LOUIS MO 63110-1810	Amount of Each Receipt this Period 210.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RAY SCHUMANN & ASSOCIATES, INC. OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 620.00	

C.	Full Name (Last, First, Middle Initial) MR. PAUL SCHUMACHER	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 1724 LARK LN	Transaction ID: SA11.13950027
	City State Zip Code CHERRY HILL NJ 08003-3215	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation HOLMAN ENTERPRISES ACCOUNTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

SUBTOTAL of Receipts This Page (optional)	345.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1980 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. DAVID A. SCHUSTER

Mailing Address 35611 ASH RD.

City State Zip Code
NEW BOSTON MI 48164-9634

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13931217

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

STACY SCHUSTERMAN

Mailing Address 2 WEST SECOND STREET
20TH FLOOR

City State Zip Code
TULSA OK 74103-3123

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SAMSON CHAIRMAN, CEO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13945253

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RICHARD W. SCHUUR

Mailing Address 13120 NIMROD PL.

City State Zip Code
LOS ANGELES CA 90049-3633

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 671.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930218

Amount of Each Receipt this Period

101.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2626.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1981 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RICHARD W. SCHUUR

Mailing Address 13120 NIMROD PL.

City State Zip Code
LOS ANGELES CA 90049-3633

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 671.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949278

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CHARLES R. SCHWAB

Mailing Address PO BOX 192861

City State Zip Code
SAN FRANCISCO CA 94119-2861

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CHARLES SCHWAB & COMPANY INC. CHAIRMAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 14500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13932248

Amount of Each Receipt this Period
4500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DONALD ALLEN SCHWARZE

Mailing Address 213 TURNBERRY

City State Zip Code
MOUNTAIN HOME AR 72653-4179

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 935.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955054

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **4650.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1982 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DONALD ALLEN SCHWARZE

Mailing Address 213 TURNBERRY

City State Zip Code
MOUNTAIN HOME AR 72653-4179

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 935.00

Date of Receipt
MM / DD / YYYY
11 / 08 / 2010

Transaction ID: SA11.13966855

Amount of Each Receipt this Period
75.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. DOROTHY SCHWARTZ

Mailing Address 1901 W 17TH. ST.

City State Zip Code
DAVENPORT IA 52804-3519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 347.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13933056

Amount of Each Receipt this Period
31.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. DOROTHY SCHWARTZ

Mailing Address 1901 W 17TH. ST.

City State Zip Code
DAVENPORT IA 52804-3519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 347.00

Date of Receipt
MM / DD / YYYY
10 / 28 / 2010

Transaction ID: SA11.13960071

Amount of Each Receipt this Period
30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **136.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1983 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
GEORGE P. SCHWARTZ

Mailing Address 3707 W MAPLE RD

City State Zip Code
BLOOMFIELD HILLS MI 48301-3212

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2010

Transaction ID: SA11.13965631

Amount of Each Receipt this Period
390.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. HELEN O. SCHWAB

Mailing Address 188 FAIR OAKS LANE

City State Zip Code
ATHERTON CA 94027-3032

FEC ID number of contributing federal political committee. **C**

Name of Employer HOME MAKER
Occupation HOME MAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
29500.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13951146

Amount of Each Receipt this Period
29500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. M. ROY SCHWARZ, M.D.

Mailing Address 812 ARMISTEAD STREET

City State Zip Code
WINCHESTER VA 22601-6703

FEC ID number of contributing federal political committee. **C**

Name of Employer CHINA MEDICAL BOARD OF NEW YORK
Occupation PHYSICIAN ADMINISTRATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
10 / 14 / 2010

Transaction ID: SA11.13930487

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **29990.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1984 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. STEPHEN B. SCHWARTZ

Mailing Address 41 CAYMAN PLACE

City State Zip Code
PALM BEACH GARDENS FL 33418-8097

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 395.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928982

Amount of Each Receipt this Period
105.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. VERNICE SCHWARTZ

Mailing Address 2157 CHANCERY DR.

City State Zip Code
LOVELAND CO 80538-4347

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13947176

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILBUR C. SCHWARK

Mailing Address 125 N. STANFORD

City State Zip Code
BONFIELD IL 60913

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939860

Amount of Each Receipt this Period
1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 131.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1985 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WILBUR C. SCHWARK

Mailing Address 125 N. STANFORD

City State Zip Code
BONFIELD IL 60913

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940817

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILLIAM E. SCHWALM

Mailing Address 8120 LAMPLIGHTER CIR.

City State Zip Code
LINCOLN NE 68510-4464

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941074

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. HAROLD M. SCHWEDER

Mailing Address 221 OLD POINTE RD.

City State Zip Code
PAWLEYS ISL SC 29585-7615

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 355.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952395

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 125.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1986 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JAMES J. SCHWEDER

Mailing Address W232S5950 CHARLES DR

City State Zip Code
WAUKESHA WI 53189-9583

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937359

Amount of Each Receipt this Period

80.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
FRANK SCIABICA, JR.

Mailing Address 2244 E MONONA DR

City State Zip Code
PHOENIX AZ 85024-4435

FEC ID number of contributing federal political committee. **C**

Name of Employer
MANPOWER

Occupation

ELECTRICAL ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950088

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. VINCENT R. SCORSONE

Mailing Address 6147 AVENIDA DEL DUQUE

City State Zip Code
RANCHO SANTA FE CA 92067

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945357

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

340.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1987 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. CALVIN WENDELL SCOTT

Mailing Address 4504 KINGSWICK DR

City State Zip Code
ARLINGTON TX 76016-2347

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 475.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939609

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. GEORGE C. SCOTT

Mailing Address 8 SLATER ST.

City State Zip Code
PORT CHESTER NY 10573

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
POLDER, INC OWNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 290.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962692

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. JANET L. SCOTT

Mailing Address 695 RIVER OAKS DRIVE

City State Zip Code
HAYESVILLE NC 28904-7811

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 560.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963692

Amount of Each Receipt this Period
300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

425.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1988 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. JETTIE M. SCOTT

Mailing Address 300 CLAIBORNE AVE APT. 4
APT. 4

City State Zip Code
FREDERICKSBURG VA 22405-2687

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949372

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBIN S. SCOTT

Mailing Address 727 NOLL DR

City State Zip Code
ARNOLD MO 63010-3935

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938712

Amount of Each Receipt this Period
80.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. THOMAS SCOTT, JR.

Mailing Address 7554 FAIRWAY WOODS DR

City State Zip Code
SARASOTA FL 34238-2858

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936916

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 205.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1989 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. TIM L. SCOTT

Mailing Address 4421 TANQUERAY PL

City State Zip Code
FORT WORTH TX 76116-8173

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TTI, INC. DIRECTOR OF MARKETING

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961824

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. WALTER SCOTT, JR.

Mailing Address 3555 FARNAM STREET

City State Zip Code
OMAHA NE 68131-3311

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LEVEL 3 COMMUNICATIONS, INC. CHAIRMAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13932251

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. MILTON LEE SCURLOCK

Mailing Address 3936 SCURLOCK LN

City State Zip Code
PANAMA CITY FL 32409-2144

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 470.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958474

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

2850.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1990 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
J. B. SEAL

Mailing Address 514 VIA DE FORTUNA WAY

City State Zip Code
MESQUITE NV 89027-7608

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13962344

Amount of Each Receipt this Period
60.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
J. B. SEAL

Mailing Address 514 VIA DE FORTUNA WAY

City State Zip Code
MESQUITE NV 89027-7608

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13973102

Amount of Each Receipt this Period
75.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MICHELE SEAL

Mailing Address P.O. BOX 25121

City State Zip Code
PORTLAND OR 97298-0121

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED LAND INVESTOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956819

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

385.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1991 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. W. H. SEAMAN

Mailing Address 7328 FORBES AVENUE

City State Zip Code
LAKE BALBOA CA 91406-2737

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13960170

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. LEE E. SEAR

Mailing Address 805 RUE ROYAL

City State Zip Code
METAIRIE LA 70005-3465

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941883

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CAROL J. SEARS

Mailing Address 46916 GRISSOM ST

City State Zip Code
STERLING VA 20165-3576

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 276.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930265

Amount of Each Receipt this Period
101.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1201.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1992 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. ANNE SEAVER

Mailing Address 16 HARBOR AVE

City State Zip Code
MARBLEHEAD MA 01945-3604

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Transaction ID: SA11.13968143

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
NADENE SEBENS

Mailing Address 1000 N UNION DR APT 135
APT 135

City State Zip Code
MONTICELLO IL 61856-1253

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
276.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940461

Amount of Each Receipt this Period

60.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JOHN P. SEDLAK

Mailing Address 31750 FAIRMOUNT BLVD

City State Zip Code
CLEVELAND OH 44124-4813

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13971266

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

610.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1993 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. WILLIAM R. SEEDS		Date of Receipt
	Mailing Address 6691 MONTGOMERY RD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 6 / 2 0 1 0
	City State Zip Code MIDLOTHIAN TX 76065-4830		Transaction ID: SA11.13951452
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) MR. GERALD SEEGER		Date of Receipt
	Mailing Address 4761 S LAKE DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 8 / 2 0 1 0
	City State Zip Code BOYNTON BEACH FL 33436-5901		Transaction ID: SA11.13933541
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer Occupation RETIRED RETIRED		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00	

C.	Full Name (Last, First, Middle Initial) MR. PAUL R. SEEGER		Date of Receipt
	Mailing Address 12720 HILLCREST RD # 530		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 1 / 2 0 1 0
	City State Zip Code DALLAS TX 75230-2000		Transaction ID: SA11.13948199
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
	Name of Employer Occupation SEEGERS ENTERPRISES INFORMATION REQUESTED PER BEST EFFORTS		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	5650.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1994 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. W. LEONARD SEELEY	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 10351 KENWOOD DR	Transaction ID: SA11.13933284
	City State Zip Code GRASS VALLEY CA 95949-7512	Amount of Each Receipt this Period 101.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 302.00	

B.	Full Name (Last, First, Middle Initial) MR. W. LEONARD SEELEY	Date of Receipt MM / DD / YYYY 11 / 19 / 2010
	Mailing Address 10351 KENWOOD DR	Transaction ID: SA11.13972087
	City State Zip Code GRASS VALLEY CA 95949-7512	Amount of Each Receipt this Period 101.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 302.00	

C.	Full Name (Last, First, Middle Initial) MRS. KATHLEEN G. SEEMAYER	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 23444 WESTFORD PL.	Transaction ID: SA11.13929001
	City State Zip Code VALENCIA CA 91354-2102	Amount of Each Receipt this Period 110.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional) ▶

312.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1995 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
THOMAS A. SEENO

Mailing Address 1980 LAS TRAMPAS RD.

City ALAMO State CA Zip Code 94507-1856

FEC ID number of contributing federal political committee. **C**

Name of Employer A.D. SEENO CONT. Occupation HOMEBUILDER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 11 / 01 / 2010

Transaction ID: SA11.13963155

Amount of Each Receipt this Period 500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. BARBARA O. SEGARS

Mailing Address 1000 HIGHLAND AVE SE

City ROME State GA Zip Code 30161-6235

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt 10 / 21 / 2010

Transaction ID: SA11.13942570

Amount of Each Receipt this Period 35.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROGERS W. SEGARS

Mailing Address 21 PATRIOT DR

City DURHAM State ME Zip Code 04222-5276

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 635.00

Date of Receipt 10 / 22 / 2010

Transaction ID: SA11.13950480

Amount of Each Receipt this Period 165.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **700.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1996 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT R. SEGERSTROM

Mailing Address 236 COUNTRY CLUB DRIVE

City State Zip Code
STERLING CO 80751-8654

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
MM / DD / YYYY
11 / 08 / 2010

Transaction ID: SA11.13966814

Amount of Each Receipt this Period
75.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. STUART SEILER

Mailing Address 12705 SE RIVER RD APT 205B

City State Zip Code
PORTLAND OR 97222-9736

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
556.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13931872

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. NORMAN W. SEIP

Mailing Address 5051 WOLF ROAD

City State Zip Code
ERIE PA 16505-1341

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
211.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2010

Transaction ID: SA11.13964728

Amount of Each Receipt this Period
80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **205.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1997 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) VIVIAN SEKIYA		Date of Receipt
	Mailing Address 91-997 KEONEAE PL.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 19 / 2010
	City	State	Zip Code
	EWA BEACH	HI	96706-4720
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13940008
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 20.00
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) VIVIAN SEKIYA		Date of Receipt
	Mailing Address 91-997 KEONEAE PL.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 19 / 2010
	City	State	Zip Code
	EWA BEACH	HI	96706-4720
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13940723
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 20.00
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MR. JAN F. SELBY		Date of Receipt
	Mailing Address 510 BROOME STREET APARTMENT 6E		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 19 / 2010
	City	State	Zip Code
	NEW YORK	NY	10013-1614
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13940637
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation PSYCHOTHERAPIST	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 540.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1998 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MR. LESTER E. SELBY</p> <p>Mailing Address 8104 W WHITAKER AVE</p> <p>City State Zip Code GREENFIELD WI 53220-3348</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 270.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 27 2010</p> <p>Transaction ID: SA11.13958679</p> <p>Amount of Each Receipt this Period 10.00</p> <p>CONTRIBUTION</p>
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<p>B. Full Name (Last, First, Middle Initial) MR. LESTER E. SELBY</p> <p>Mailing Address 8104 W WHITAKER AVE</p> <p>City State Zip Code GREENFIELD WI 53220-3348</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 270.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 27 2010</p> <p>Transaction ID: SA11.13958755</p> <p>Amount of Each Receipt this Period 40.00</p> <p>CONTRIBUTION</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) MR. PETER J. SELESKY</p> <p>Mailing Address 71 PATERSON ST.</p> <p>City State Zip Code NEW BRUNSWICK NJ 08901-2145</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation SELF-EMPLOYED ATTORNEY</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 21 2010</p> <p>Transaction ID: SA11.13942614</p> <p>Amount of Each Receipt this Period 100.00</p> <p>CONTRIBUTION</p>
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SUBTOTAL of Receipts This Page (optional)	150.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1999 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES C. SELEY

Mailing Address 1675 S. EUCLID AVENUE

City State Zip Code
SAN MARINO CA 91108-1604

FEC ID number of contributing federal political committee. **C**

Name of Employer SELEY & CO Occupation COMMODITY MERCHANT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 701.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13953624

Amount of Each Receipt this Period
101.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOE W. SELF, JR.

Mailing Address 13019 E. PINEHURST DRIVE

City State Zip Code
WICHITA KS 67230-1446

FEC ID number of contributing federal political committee. **C**

Name of Employer JOE SELF CHEVROLET Occupation AUTO DEALER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 411.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13934619

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOE W. SELF, JR.

Mailing Address 13019 E. PINEHURST DRIVE

City State Zip Code
WICHITA KS 67230-1446

FEC ID number of contributing federal political committee. **C**

Name of Employer JOE SELF CHEVROLET Occupation AUTO DEALER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 411.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13935957

Amount of Each Receipt this Period
1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **302.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2000 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) RANDY SELFRIDGE		Date of Receipt
	Mailing Address 43480 NE T RD.		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	BURDETT	KS	67523-2407
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer FIVE STAR FARM INC.		Occupation FARMER	Transaction ID: SA11.13960099
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="201.00"/>	<input type="text" value="101.00"/>
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) MR. WILLIAM M. SELKIRK		Date of Receipt
	Mailing Address 186 PRETTY LAKE DR.		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	MATTAWAN	MI	49071-9416
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13955548
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="206.00"/>	<input type="text" value="15.00"/>
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) DR. TERRY SELLKE		Date of Receipt
	Mailing Address 1701 LAKEVIEW TER		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	LIBERTYVILLE	IL	60048-4813
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer SELF-EMPLOYED		Occupation ORTHODONTIST	Transaction ID: SA11.13956750
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="2500.00"/>	<input type="text" value="1000.00"/>
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1116.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2001 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. DARRELL L. SELLS		Date of Receipt
	Mailing Address 575 MALL BLVD. STE M.		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	DYERSBURG	TN	38024-1690
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13956724
Name of Employer DL SALES INC.		Occupation OWNER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="500.00"/>
		<input type="text" value="800.00"/>	CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MR. BULENT SERBES		Date of Receipt
	Mailing Address 115 LAKESHORE DR APT 1046		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	NORTH PALM BEACH	FL	33408-3644
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13934812
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="11.00"/>
		<input type="text" value="261.00"/>	CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) JOHN W. SERCER		Date of Receipt
	Mailing Address 4800 E PLACITA TRES VIDAS		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	TUCSON	AZ	85718-2614
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13952852
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="200.00"/>
		<input type="text" value="340.00"/>	CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="711.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2002 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. ANDREA SERNA	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 12813 DORIS DR	Transaction ID: SA11.13929506
	City State Zip Code BLACK HAWK SD 57718-9381	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer NATIONAL AMERICAN UNIVERSITY	Occupation HIGHER ED ADMINISTRATION	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 291.00	

B.	Full Name (Last, First, Middle Initial) MS. JOANNE F. SERRAINO	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 204 HARRISON AVE	Transaction ID: SA11.13960185
	City State Zip Code HASBROUCK HTS NJ 07604-1604	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

C.	Full Name (Last, First, Middle Initial) MR. BEN H. SETTLES, USAF	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 4917 RAVENSWOOD DR. APT. 1509	Transaction ID: SA11.13959991
	City State Zip Code SAN ANTONIO TX 78227-4343	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

SUBTOTAL of Receipts This Page (optional)	▶	95.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2003 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MYREN R. SEVERIN

Mailing Address 94-1133 KAPEHU ST

City State Zip Code
WAIPAHU HI 96797-5403

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CENTRAL CARE INC DENTIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939596

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. BARBARA A. SEXTON

Mailing Address 8701A ROCKY RIDGE RD

City State Zip Code
ROCKY RIDGE MD 21778-9305

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SEXTON CONTRACTORS GENERAL CONTRACTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959097

Amount of Each Receipt this Period
60.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOHN SEXTON

Mailing Address 1720 DORCHESTER DRIVE

City State Zip Code
NICHOLS HILLS OK 73120-1006

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ASHLY AUDIO INC SALES MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1600.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939563

Amount of Each Receipt this Period
400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 560.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2004 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. KAREN SEXTON

Mailing Address 2163 STAGE STOP DR

City Henderson State NV Zip Code 89052-5824

FEC ID number of contributing federal political committee. **C**

Name of Employer REMAX Occupation REAL ESTATE AGENT

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date 300.00

Date of Receipt 11 / 04 / 2010

Transaction ID: SA11.13965156

Amount of Each Receipt this Period 100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NANCY R. SEXTON

Mailing Address 303 E WATER ST

City Mount Vernon State IN Zip Code 47620-1945

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date 221.00

Date of Receipt 10 / 22 / 2010

Transaction ID: SA11.13949186

Amount of Each Receipt this Period 25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. TERRANCE J. SHACKELTON

Mailing Address 5609 CHIMNEY SWIFT DRIVE

City Wake Forest State NC Zip Code 27587-6703

FEC ID number of contributing federal political committee. **C**

Name of Employer INTER-PACIFIC CORP Occupation EXECUTIVE

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date 360.00

Date of Receipt 11 / 04 / 2010

Transaction ID: SA11.13965800

Amount of Each Receipt this Period 100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) **225.00**

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2005 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
ELIZAVETA H. SHADURA

Mailing Address P.O. BOX 985

City State Zip Code
KASILOF AK 99610-0985

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932694

Amount of Each Receipt this Period

120.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. DAVID R. SHAEFFER

Mailing Address 9316 45TH PL SE

City State Zip Code
SNOHOMISH WA 98290-9214

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
RETIRED

Aggregate Year-to-Date ▼
1371.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948893

Amount of Each Receipt this Period

180.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. DAVID R. SHAEFFER

Mailing Address 9316 45TH PL SE

City State Zip Code
SNOHOMISH WA 98290-9214

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
RETIRED

Aggregate Year-to-Date ▼
1371.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950505

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

400.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2006 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MR. DAVID R. SHAEFFER</p> <p>Mailing Address 9316 45TH PL SE</p> <hr/> <p>City State Zip Code SNOHOMISH WA 98290-9214</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1371.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0</p> <p>Transaction ID: SA11.13950578</p> <p>Amount of Each Receipt this Period 75.00</p> <p>CONTRIBUTION</p>
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<p>B. Full Name (Last, First, Middle Initial) MR. DAVID R. SHAEFFER</p> <p>Mailing Address 9316 45TH PL SE</p> <hr/> <p>City State Zip Code SNOHOMISH WA 98290-9214</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1371.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 1 0</p> <p>Transaction ID: SA11.13963721</p> <p>Amount of Each Receipt this Period 75.00</p> <p>CONTRIBUTION</p>
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<p>C. Full Name (Last, First, Middle Initial) MR. YAGOB SHAER</p> <p>Mailing Address 5354 BAY HILL DR</p> <hr/> <p>City State Zip Code CANFIELD OH 44406-9592</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 600.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 1 0</p> <p>Transaction ID: SA11.13935116</p> <p>Amount of Each Receipt this Period 300.00</p> <p>CONTRIBUTION</p>
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SUBTOTAL of Receipts This Page (optional)	450.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2007 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. DIANNE S. SHAFFIER

Mailing Address 501 E MESQUITE ST

City State Zip Code
GILBERT AZ 85296-1715

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 28 / 2010

Transaction ID: SA11.13957668

Amount of Each Receipt this Period

210.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. FRANK O. SHAFFER

Mailing Address 12201 WOODVALE CT

City State Zip Code
HERNDON VA 20170-2753

FEC ID number of contributing federal political committee. **C**

Name of Employer
BRITISH TELECOM

Occupation
DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 19 / 2010

Transaction ID: SA11.13932359

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. L. D. SHAFFER

Mailing Address 557 ORIOLE COURT

City State Zip Code
CRIDERSVILLE OH 45806-9625

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
361.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 19 / 2010

Transaction ID: SA11.13939254

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

360.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2008 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. RICHARD W. SHAFFER

Mailing Address 82751 BOSTON CT.

City State Zip Code
INDIO CA 92201-5909

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 557.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13969680

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
THOMAS G. SHAFFER, JR.

Mailing Address 20 DEVONWOOD DR APT 173

City State Zip Code
FARMINGTON CT 06032-1470

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 761.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929142

Amount of Each Receipt this Period

60.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
THOMAS G. SHAFFER, JR.

Mailing Address 20 DEVONWOOD DR APT 173

City State Zip Code
FARMINGTON CT 06032-1470

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 761.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935260

Amount of Each Receipt this Period

120.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

205.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2009 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
THOMAS G. SHAFFER, JR.
Mailing Address 20 DEVONWOOD DR APT 173
City FARMINGTON State CT Zip Code 06032-1470
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 761.00
Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13949058
Amount of Each Receipt this Period 80.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
THOMAS G. SHAFFER, JR.
Mailing Address 20 DEVONWOOD DR APT 173
City FARMINGTON State CT Zip Code 06032-1470
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 761.00
Date of Receipt 10 / 26 / 2010
Transaction ID: SA11.13956179
Amount of Each Receipt this Period 120.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
THOMAS G. SHAFFER, JR.
Mailing Address 20 DEVONWOOD DR APT 173
City FARMINGTON State CT Zip Code 06032-1470
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 761.00
Date of Receipt 11 / 16 / 2010
Transaction ID: SA11.13969297
Amount of Each Receipt this Period 60.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 260.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2010 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
NANCY SHAFRANSKI-CAMPOBELLO

Mailing Address 5817 BRANDONS WAY

City State Zip Code
ELKRIDGE MD 21075-7301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UNEMPLOYED MARKETING

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13937410

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SATISH C. SHAH

Mailing Address 6361 SE HARBOR CIR.

City State Zip Code
STUART FL 34996-1921

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938798

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SATISH C. SHAH

Mailing Address 6361 SE HARBOR CIR.

City State Zip Code
STUART FL 34996-1921

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944580

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **450.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2011 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DR. IMRAN SHAHAB

Mailing Address 5956 DAVENHILL DR

City State Zip Code
PLANO TX 75093-4346

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
PHYSICIAN

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959159

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JAMES SHAHIDI

Mailing Address 3 BAYVIEW TER

City State Zip Code
DUNELLEN NJ 08812-1915

FEC ID number of contributing federal political committee. **C**

Name of Employer
SUMMIT FILTER CORP

Occupation
CEO

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949813

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DR. SHANAZ SHAKOORI

Mailing Address 3131 S RIDGE RD.

City State Zip Code
AKRON OH 44333-2684

FEC ID number of contributing federal political committee. **C**

Name of Employer
SICK LANE

Occupation
PHYSICIAN

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962734

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

600.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2012 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. JANICE E. SHALLENBERG

Mailing Address 140 WINDSOR PARK DR. APT. E301

City State Zip Code
CAROL STREAM IL 60188-4124

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 271.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958628

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. JUDY LU SHALLENBERGER

Mailing Address P.O. BOX 617

City State Zip Code
GENOA NV 89411-0617

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED INVESTOR

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 495.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931575

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. NED SHANAMAN

Mailing Address P.O. BOX 163

City State Zip Code
RICHLAND PA 17087-0163

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 545.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941826

Amount of Each Receipt this Period

225.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2013 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. CHARLES R. SHANKLIN

Mailing Address 1421 RUM STILL CIR.

City State Zip Code
NICEVILLE FL 32578-1662

FEC ID number of contributing federal political committee. C

Name of Employer
NANO MATERIALS & MANUFACTURING

Occupation
CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961817

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. JANICE SHANNON

Mailing Address 9074 W CORNELL PL

City State Zip Code
LAKEWOOD CO 80227-4506

FEC ID number of contributing federal political committee. C

Name of Employer
SELF-EMPLOYED

Occupation
FRANCHISE DAIRY QUEEN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13965224

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JOSEPH R. SHANNON, JR.

Mailing Address 7 PINE CREEK LANE

City State Zip Code
HOUSTON TX 77055-6723

FEC ID number of contributing federal political committee. C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935718

Amount of Each Receipt this Period

75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

725.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2014 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. LESTER B. SHAPIRO

Mailing Address 225 GIROD ST APT 303
APT 303

City State Zip Code
NEW ORLEANS LA 70130-1685

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED ANTIQUE DEALER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933009

Amount of Each Receipt this Period
101.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. RYAN SHAPIRO

Mailing Address 1271 99 STREET

City State Zip Code
BAY HARBOR ISLANDS FL 33154-1101

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JPAY CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 7500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13957955

Amount of Each Receipt this Period
7500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. CONRAD A. SHARADER

Mailing Address 153 E OAKWOOD ST

City State Zip Code
TARPON SPGS FL 34689-3645

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ARCHITECTURAL METAL WORKS OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928851

Amount of Each Receipt this Period
110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **7711.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2015 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. ROBERT W. SHARP	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 9 / 2 0 1 0
	Mailing Address 2 GITTINGS AVE	Transaction ID: SA11.13939487
	City State Zip Code BALTIMORE MD 21212-2418	Amount of Each Receipt this Period 3.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 283.00	

B.	Full Name (Last, First, Middle Initial) CHARLES SHARTLE	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 1 0
	Mailing Address P.O. BOX 1049	Transaction ID: SA11.13933539
	City State Zip Code CROCKETT TX 75835-1049	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

C.	Full Name (Last, First, Middle Initial) MRS. BETTY B. SHAW	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	Mailing Address 43 SHANNON STREET	Transaction ID: SA11.13954598
	City State Zip Code BATH NY 14810-1242	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer HOMEMAKER	Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional)	153.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2016 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. DAVID L. SHAW

Mailing Address 225 COLEWOOD WAY NW

City ATLANTA State GA Zip Code 30328-2922

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1260.00

Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13931728
Amount of Each Receipt this Period 510.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. DONNA SHAW

Mailing Address 13915 104TH AVE

City DAVENPORT State IA Zip Code 52804-9040

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13941933
Amount of Each Receipt this Period 600.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DONALD M. SHAW

Mailing Address 1525 PIPER DUNES PL

City FERNANDINA State FL Zip Code 32034-6619

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13931924
Amount of Each Receipt this Period 210.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1320.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2017 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DOYLE G. SHAW

Mailing Address 4440 DUE WEST RD NW

City State Zip Code
KENNESAW GA 30152-3853

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13953120
Amount of Each Receipt this Period: 20.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ED SHAW

Mailing Address 2625 COONPATH RD NE

City State Zip Code
LANCASTER OH 43130-8868

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SHAW AND HOLTER INC. CONTRACTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt: 11 / 22 / 2010
Transaction ID: SA11.13971799
Amount of Each Receipt this Period: 80.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES C. SHAW

Mailing Address 468 CLOVER HILL DR.

City State Zip Code
TIPP CITY OH 45371-2488

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt: 11 / 01 / 2010
Transaction ID: SA11.13963985
Amount of Each Receipt this Period: 30.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 130.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2018 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
PAMELA G. SHAW

Mailing Address 210 BEECHMONT ST.

City State Zip Code
DEARBORN MI 48124-1347

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935805

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. STUART SHAW

Mailing Address 6009 ELEOS CIR

City State Zip Code
AUSTIN TX 78735-6110

FEC ID number of contributing federal political committee. **C**

Name of Employer BONNER CARRINGTON
Occupation REAL ESTATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955902

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. VALOYCE G. SHAW

Mailing Address 1411 MELS DR.

City State Zip Code
GARDEN CITY KS 67846-3364

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED
Occupation MERCHANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
301.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929496

Amount of Each Receipt this Period
150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **850.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2019 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. VALOYCE G. SHAW
Mailing Address 1411 MELS DR.
City State Zip Code
GARDEN CITY KS 67846-3364
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
SELF-EMPLOYED MERCHANT
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 301.00
Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0
Transaction ID: SA11.13941687
Amount of Each Receipt this Period
76.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
EDWARD J. SHEA
Mailing Address 366 GILMORE POND RD.
City State Zip Code
JAFFREY NH 03452-6129
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00
Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0
Transaction ID: SA11.13943688
Amount of Each Receipt this Period
100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BLANCHE L. SHEARER
Mailing Address 9427 LETICIA DR.
City State Zip Code
SANTEE CA 92071-2249
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
HOMEMAKER HOMEMAKER
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 315.00
Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0
Transaction ID: SA11.13948713
Amount of Each Receipt this Period
40.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 216.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2020 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
BLANCHE L. SHEARER

Mailing Address 9427 LETICIA DR.

City State Zip Code
SANTEE CA 92071-2249

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13950678

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BLANCHE L. SHEARER

Mailing Address 9427 LETICIA DR.

City State Zip Code
SANTEE CA 92071-2249

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13950691

Amount of Each Receipt this Period
60.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DON SHEARER

Mailing Address 1947 CRESTMONT DR

City State Zip Code
SAN JOSE CA 95124-1106

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 410.00

Date of Receipt
MM / DD / YYYY
11 / 12 / 2010

Transaction ID: SA11.13967833

Amount of Each Receipt this Period
210.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **320.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2021 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. OLIVER V. SHEARER, JR.

Mailing Address 207 GRAND OAK BOULEVARD

City State Zip Code
CLINTON MS 39056-6042

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953659

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. GARY F. SHEFFER

Mailing Address 10 MAYFLOWER LANE

City State Zip Code
SHELTON CT 06484-2292

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13932258

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. LARRY A. SHEFLO

Mailing Address 29572 WOODBROOK DR

City State Zip Code
AGOURA HILLS CA 91301-4411

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PLANTER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958966

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **2090.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2022 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MERLE SHELBOURN

Mailing Address 30139 269TH AVE

City State Zip Code
CROOKSTON NE 69212-7001

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	6	/	2	0	1	0

Transaction ID: SA11.13951432

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. W GARY SHELDEN

Mailing Address 818 5TH AVENUE N.

City State Zip Code
GREAT FALLS MT 59401-1532

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13954610

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN E. SHELK

Mailing Address 4845 YORKTOWN BLVD

City State Zip Code
ARLINGTON VA 22207-2737

FEC ID number of contributing federal political committee. **C**

Name of Employer AMERICAN GAMING BOARD
Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	6	/	2	0	1	0

Transaction ID: SA11.13966013

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **400.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2023 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. JOHNNY LOWELL SHELTON	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address P.O. BOX 219	Transaction ID: SA11.13935128
	City State Zip Code GOLDTHWAITE TX 76844-0219	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

B.	Full Name (Last, First, Middle Initial) MR. RODNEY SHEPHERD	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address P.O. BOX 598	Transaction ID: SA11.13929215
	City State Zip Code HUBERT NC 28539-0598	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

C.	Full Name (Last, First, Middle Initial) MR. W S. SHEPHERD	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 735 LIBERTY AVE	Transaction ID: SA11.13939190
	City State Zip Code BEAUMONT TX 77701-2219	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	120.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2024 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. W S. SHEPHERD

Mailing Address 735 LIBERTY AVE

City State Zip Code
BEAUMONT TX 77701-2219

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13963401

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. WILLIAM KEITH SHEPHERD

Mailing Address 2308 W. E. STREET

City State Zip Code
NORTH PLATTE NE 69101-4945

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13941757

Amount of Each Receipt this Period
36.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ROBERT SHEPPARD

Mailing Address 12319 DRAKE PRAIRIE LANE

City State Zip Code
CYPRESS TX 77429-3889

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
10 / 27 / 2010

Transaction ID: SA11.13955976

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **5086.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2025 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
TOM SHEPPARD

Mailing Address 116 EVERGREEN PLACE

City State Zip Code
BRISTOL TN 37620-3059

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TRAMCO SERVICES, INC. PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945574

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ALVIN SHERMAN

Mailing Address 4295 H STREET RD

City State Zip Code
BLAINE WA 98230-9228

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13973223

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. BETTY J. SHERMAN

Mailing Address 9452 CAPE CHARLES AVE

City State Zip Code
NEW PORT RICHEY FL 34655-1504

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928293

Amount of Each Receipt this Period
120.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 260.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2026 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JOHN EDWARD SHERMAN

Mailing Address 4141 COUNTRY CLUB CIR.

City State Zip Code
VIRGINIA BCH VA 23455-4454

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939514

Amount of Each Receipt this Period

90.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DR. JONATHAN SHERMAN

Mailing Address CAROLINA SPINE & NEUROSURGERY CENT

City State Zip Code
ASHEVILLE NC 28803

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CAROLINA SPINE AND NEUROSURGERY JONATHAN SHERMAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13957981

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
ESTHER SHERWOOD

Mailing Address 175 N GIRARD ST. APT. 103

City State Zip Code
HEMET CA 92544-4650

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 626.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943640

Amount of Each Receipt this Period

60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2027 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ESTHER SHERWOOD

Mailing Address 175 N GIRARD ST. APT. 103

City State Zip Code
HEMET CA 92544-4650

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 626.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949116

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ESTHER SHERWOOD

Mailing Address 175 N GIRARD ST. APT. 103

City State Zip Code
HEMET CA 92544-4650

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 626.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954618

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. NEAL T. SHERWOOD

Mailing Address 10605 SAN MARCOS RD

City State Zip Code
ATASCADERO CA 93422-2211

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945618

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **200.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2028 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. RANDY M. SHERWOOD

Mailing Address 16904 S DALTON AVE

City State Zip Code
GARDENA CA 90247-5409

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FARMER BROTHERS TRUCK DRIVER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955860

Amount of Each Receipt this Period

160.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. ELIZABETH L. SHIELDS

Mailing Address UNIT 15
7705 E DOUBLETREE RANCH RD

City State Zip Code
SCOTTSDALE AZ 85258-2055

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 216.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933002

Amount of Each Receipt this Period

26.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. HARRY D. SHIELDS

Mailing Address 2209 OLD HICKORY BLVD

City State Zip Code
NASHVILLE TN 37215-5309

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SALES

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931699

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

286.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2029 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MORRIS R. SHIELDS

Mailing Address 2240 S 186TH. ST.

City OMAHA State NE Zip Code 68130-2756

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13939538
 Amount of Each Receipt this Period: 150.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ROBERT M. SHIELS

Mailing Address 5427 FM 2515

City KAUFMAN State TX Zip Code 75142-5270

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13943300
 Amount of Each Receipt this Period: 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WILLIAM SHIELDS

Mailing Address 2130 N. KLONDIKE DR.

City TUCSON State AZ Zip Code 85749-9725

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13952292
 Amount of Each Receipt this Period: 200.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 450.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2030 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM P. SHIELD

Mailing Address 1008 BUCKINGHAM

City State Zip Code
GROSSE POINTE PARK MI 48230-1441

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DICKINSON WRIGHT PLLC ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13940783

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM P. SHIELD

Mailing Address 1008 BUCKINGHAM

City State Zip Code
GROSSE POINTE PARK MI 48230-1441

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DICKINSON WRIGHT PLLC ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
MM / DD / YYYY
10 / 29 / 2010

Transaction ID: SA11.13959385

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOHN SHILLINGBURG

Mailing Address 4800 FILLMORE AVE APT. 603

City State Zip Code
ALEXANDRIA VA 22311-5057

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13946625

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 200.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2031 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DR. NAK K. SHIM

Mailing Address 2180 W LAKE RD

City State Zip Code
SKANEATELES NY 13152-9615

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13951965

Amount of Each Receipt this Period
101.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DR. NAK K. SHIM

Mailing Address 2180 W LAKE RD

City State Zip Code
SKANEATELES NY 13152-9615

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953106

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
LEON SHIMER

Mailing Address 7114 SW 90TH ST

City State Zip Code
HAMPTON FL 32044-4338

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933186

Amount of Each Receipt this Period
101.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **302.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2032 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ROBERT P. SHIMKUS

Mailing Address 2004 LAKESIDE COURT

City State Zip Code
CHAMPAIGN IL 61821-6474

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 435.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955044

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. LARRY H. SHINGLER

Mailing Address 804 CHOCTAW LANE

City State Zip Code
SHALIMAR FL 32579-2247

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943597

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. INNESSA SHINKARSKY

Mailing Address 575 LOS PALMOS DR

City State Zip Code
SAN FRANCISCO CA 94127-2209

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS SOFTWARE ENGINEER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951377

Amount of Each Receipt this Period

80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

205.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2033 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ETHELYN SHINN

Mailing Address 727 ALAMEDA BLVD

City State Zip Code
CORONADO CA 92118-2013

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13947772

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LOIS SHINN

Mailing Address 2016 LEON BADEN RD

City State Zip Code
LEON WV 25123-6334

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 355.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918707

Amount of Each Receipt this Period
85.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GRAHAM SHIPMAN

Mailing Address P.O. BOX 1632

City State Zip Code
MOUNT SHASTA CA 96067-1632

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 4 / 2 0 1 0

Transaction ID: SA11.13965869

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **285.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2034 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. KENNETH L. SHIPPY

Mailing Address 735 WINTER RD.

City State Zip Code
GATESVILLE TX 76528-3316

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 391.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943562

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. KENNETH L. SHIPPY

Mailing Address 735 WINTER RD.

City State Zip Code
GATESVILLE TX 76528-3316

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 391.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Transaction ID: SA11.13968058

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BRUCE R. SHIREY

Mailing Address 3662 RANFIELD RD

City State Zip Code
KENT OH 44240-6765

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 555.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944646

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 105.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2035 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ALLAN SHIVERS, JR.
 Mailing Address 2905 SAN GABRIEL STREET
SUITE 213
 City State Zip Code
AUSTIN TX 78705-3541
 Date of Receipt
MM / DD / YYYY
10 / 22 / 2010
 Transaction ID: SA11.13951131
 Amount of Each Receipt this Period
2500.00
 CONTRIBUTION
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
SELF-EMPLOYED BUSINESS CONSULTANT
 Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 2500.00

B. Full Name (Last, First, Middle Initial)
JAMES D. SHOCKEY, JR.
 Mailing Address P.O. BOX 2530
 City State Zip Code
WINCHESTER VA 22604-1729
 Date of Receipt
MM / DD / YYYY
10 / 19 / 2010
 Transaction ID: SA11.13939561
 Amount of Each Receipt this Period
250.00
 CONTRIBUTION
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 350.00

C. Full Name (Last, First, Middle Initial)
MR. SAMUEL F. SHON
 Mailing Address 10602 HUMBOLT STREET
 City State Zip Code
LOS ALAMITOS CA 90720-2448
 Date of Receipt
MM / DD / YYYY
10 / 19 / 2010
 Transaction ID: SA11.13931865
 Amount of Each Receipt this Period
100.00
 CONTRIBUTION
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
SURE FORMING SYSTEMS INC. EXECUTIVE
 Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

SUBTOTAL of Receipts This Page (optional) ► 2850.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2036 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. RALPH L. SHOOK	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 493 COUNTY RD. 4050	Transaction ID: SA11.13939013
	City State Zip Code SALEM MO 65560-3326	Amount of Each Receipt this Period 1.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 221.00	

B.	Full Name (Last, First, Middle Initial) MR. RALPH L. SHOOK	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 493 COUNTY RD. 4050	Transaction ID: SA11.13939768
	City State Zip Code SALEM MO 65560-3326	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 221.00	

C.	Full Name (Last, First, Middle Initial) MS. EDNA S. SHORE	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 1225 HAVENDALE BLVD NW APT 417	Transaction ID: SA11.13954116
	City State Zip Code WINTER HAVEN FL 33881-5309	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	161.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2037 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MR. LARRY SHORES</p> <p>Mailing Address 15570 PINENEEDLE CT</p> <p>City State Zip Code COLORADO SPRINGS CO 80921-3701</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation SELF-EMPLOYED PHYSICIAN</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 360.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 1 0</p> <p>Transaction ID: SA11.13931327</p> <p>Amount of Each Receipt this Period 100.00</p> <p>CONTRIBUTION</p>
--	--

<p>B. Full Name (Last, First, Middle Initial) MR. MARION SHORE</p> <p>Mailing Address 3666 N. MESSICK RD.</p> <p>City State Zip Code NEW CASTLE IN 47362-9315</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 430.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0</p> <p>Transaction ID: SA11.13952969</p> <p>Amount of Each Receipt this Period 100.00</p> <p>CONTRIBUTION</p>
--	--

<p>C. Full Name (Last, First, Middle Initial) MR. MICHAEL F. SHORT</p> <p>Mailing Address PO BOX 7735</p> <p>City State Zip Code WACO TX 76714-7735</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation F M SHORT CO. PRESIDENT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 1 0</p> <p>Transaction ID: SA11.13960725</p> <p>Amount of Each Receipt this Period 500.00</p> <p>CONTRIBUTION</p>
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SUBTOTAL of Receipts This Page (optional)	700.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2038 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. RICK A. SHORT	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 157 HAZELNUT DR	Transaction ID: SA11.13928988
	City State Zip Code JONESBOROUGH TN 37659-6196	Amount of Each Receipt this Period 55.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	

B.	Full Name (Last, First, Middle Initial) GWYNNE SHOTWELL	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 18 BUCKSKIN LANE	Transaction ID: SA11.13927991
	City State Zip Code ROLLING HILLS ESTA CA 90274-4205	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SPACE X PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

C.	Full Name (Last, First, Middle Initial) CHARLES ARTHUR SHOULTZ	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 15004 SENDERO LN	Transaction ID: SA11.13952879
	City State Zip Code WOODWAY TX 76712-7570	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	5555.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2039 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RUSSELL H. SHOWALTER, JR.

Mailing Address 32 SARAGOSSA STREET

City State Zip Code
ST AUGUSTINE FL 32084-3569

FEC ID number of contributing federal political committee. **C**

Name of Employer
DALE BALD SHOWALTER MERCER & GREEN

Occupation
ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959814

Amount of Each Receipt this Period
125.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JIM SHOWERS

Mailing Address 105 SEMINARY DR

City State Zip Code
MILL VALLEY CA 94941-3146

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941260

Amount of Each Receipt this Period
30.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JIM SHOWERS

Mailing Address 105 SEMINARY DR

City State Zip Code
MILL VALLEY CA 94941-3146

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948816

Amount of Each Receipt this Period
45.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **200.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2040 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. MILDRED SHOWS

Mailing Address 279 BLACKWELL ROAD

City State Zip Code
MENDENHALL MS 39114-5686

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943772

Amount of Each Receipt this Period

15.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. MILDRED SHOWS

Mailing Address 279 BLACKWELL ROAD

City State Zip Code
MENDENHALL MS 39114-5686

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952040

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DR. LESLIE A. SHREM

Mailing Address 197 RIDGEDALE AVE

City State Zip Code
CEDAR KNOLLS NJ 07927

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NORTHERN ANESTLOSIA PHYSICIAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 850.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13932292

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

365.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2041 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
JAMES M. SHRODE

Mailing Address 16442 GRIMAUD LN

City State Zip Code
HUNTINGTN BCH CA 92649-1827

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939147

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. DOLLY D. SHULER

Mailing Address 2209 E. 60TH STREET

City State Zip Code
SAVANNAH GA 31404-5119

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946052

Amount of Each Receipt this Period
75.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. DOLLY D. SHULER

Mailing Address 2209 E. 60TH STREET

City State Zip Code
SAVANNAH GA 31404-5119

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953262

Amount of Each Receipt this Period
75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **250.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2042 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. DOLLY D. SHULER	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 1 0
	Mailing Address 2209 E. 60TH STREET	Transaction ID: SA11.13957590
	City State Zip Code SAVANNAH GA 31404-5119	Amount of Each Receipt this Period 35.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

B.	Full Name (Last, First, Middle Initial) MS. DOROTHY A. SHURTLEFF	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	Mailing Address P.O. BOX 2260	Transaction ID: SA11.13955165
	City State Zip Code PIKEVILLE KY 41502-2260	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	

C.	Full Name (Last, First, Middle Initial) DR. RICHARD H. SHUTTE	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	Mailing Address 3842 GRANT AVE	Transaction ID: SA11.13951860
	City State Zip Code DAYTON OH 45431-1598	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	

SUBTOTAL of Receipts This Page (optional)	▶	210.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2043 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DR. RICHARD H. SHUTTE		Date of Receipt
	Mailing Address 3842 GRANT AVE		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	DAYTON	OH	45431-1598
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13952584
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="625.00"/>	<input type="text" value="50.00"/>
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MR. BILL SIBLEY		Date of Receipt
	Mailing Address 3204 REED DR		<input type="text" value="11"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	BELLEVUE	NE	68005-3964
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13972855
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="306.00"/>	<input type="text" value="20.00"/>
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) LT. COL. WILLIAM H. SIBLEY, RET.		Date of Receipt
	Mailing Address 3204 REED DR.		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	BELLEVUE	NE	68005-3964
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13934029
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="876.00"/>	<input type="text" value="30.00"/>
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="100.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2044 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
LT. COL. WILLIAM H. SIBLEY, RET.
Mailing Address 3204 REED DR.

City: BELLEVUE State: NE Zip Code: 68005-3964

FEC ID number of contributing federal political committee: **C**

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 876.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13941569
Amount of Each Receipt this Period: 51.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LT. COL. WILLIAM H. SIBLEY, RET.
Mailing Address 3204 REED DR.

City: BELLEVUE State: NE Zip Code: 68005-3964

FEC ID number of contributing federal political committee: **C**

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 876.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13953876
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LT. COL. WILLIAM H. SIBLEY, RET.
Mailing Address 3204 REED DR.

City: BELLEVUE State: NE Zip Code: 68005-3964

FEC ID number of contributing federal political committee: **C**

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 876.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13957298
Amount of Each Receipt this Period: 80.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 171.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2045 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
RONALD SIDERS

Mailing Address 1955 WEDGEWOOD CIR

City State Zip Code
SPRINGFIELD OH 45503-1769

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 521.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933294

Amount of Each Receipt this Period
76.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DR. STEVEN D. SIDES

Mailing Address 5321 W B ST

City State Zip Code
GREELEY CO 80634-4269

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BANNER HEALTH PHYSICIAN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963622

Amount of Each Receipt this Period
150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JOHN J. SIE

Mailing Address 21 SANDY LAKE RD.

City State Zip Code
ENGLEWOOD CO 80113-4140

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AJS VENTURES LLC OWNER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13932437

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

1226.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2046 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. WALTER F. SIEBECKER	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 262 CENTRAL PARK W APT. 3D	Transaction ID: SA11.13956727
	City State Zip Code NEW YORK NY 10024	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1111.00	

B.	Full Name (Last, First, Middle Initial) MS. CHRISTEL SIEDENTOP	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 978 BLACKBURN DRIVE	Transaction ID: SA11.13943693
	City State Zip Code INVERNESS IL 60067-4216	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.00	

C.	Full Name (Last, First, Middle Initial) MS. CHRISTEL SIEDENTOP	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 978 BLACKBURN DRIVE	Transaction ID: SA11.13958367
	City State Zip Code INVERNESS IL 60067-4216	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.00	

SUBTOTAL of Receipts This Page (optional)	130.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2047 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JOHN J. SIEFFERT

Mailing Address 740 RANDALL DRIVE

City State Zip Code
TROY MI 48085-4853

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1800.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13951687

Amount of Each Receipt this Period
300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
ERIC R. SIEGEL

Mailing Address 501 RIDGEWAY DR. APT. 7

City State Zip Code
LITTLE ROCK AR 72205-4180

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
UNIVERSITY OF ARKANSAS FOR MEDICAL SCI BIOSTATISTICIAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953363

Amount of Each Receipt this Period
400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
PATRICIA A. SIEMSEN

Mailing Address 27025 GLYNNS CREEK CT.

City State Zip Code
ELDRIDGE IA 52748-9405

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958343

Amount of Each Receipt this Period
30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

730.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2048 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
PATRICIA A. SIEMSEN

Mailing Address 27025 GLYNNS CREEK CT.

City State Zip Code
ELDRIDGE IA 52748-9405

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
10 / 27 / 2010

Transaction ID: SA11.13958625

Amount of Each Receipt this Period
30.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JILL SIGAL

Mailing Address 6400 RIDGE DRIVE

City State Zip Code
BETHESDA MD 20816-2638

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JILL SIGAL ASSOCIATES CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
10 / 20 / 2010

Transaction ID: SA11.13938784

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
FREDA SIGILLITO

Mailing Address 1113 HOLLYDALE DR

City State Zip Code
FULLERTON CA 92831-2822

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FULLERTON SCHOOL DISTR INSTRUCTIONAL ASST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt
MM / DD / YYYY
11 / 03 / 2010

Transaction ID: SA11.13965225

Amount of Each Receipt this Period
1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1031.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2049 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) FREDA SIGILLITO	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 1113 HOLLYDALE DR	Transaction ID: SA11.13965271
	City State Zip Code FULLERTON CA 92831-2822	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer FULLERTON SCHOOL DISTR	Occupation INSTRUCTIONAL ASST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.00	

B.	Full Name (Last, First, Middle Initial) DAVID SIINO	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 120 GREENWICH STREET	Transaction ID: SA11.13929708
	City State Zip Code NEW YORK NY 10006	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer EPOCH INVESTMENT PARTNERS	Occupation ANALYST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

C.	Full Name (Last, First, Middle Initial) MRS. SUZANNE SILBERG	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 18776 BERNARDO TRAILS DR.	Transaction ID: SA11.13964393
	City State Zip Code SAN DIEGO CA 92128-1113	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional)	▶	325.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2050 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. KIMBERLY A. SILVA	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 35603 MORLEY PL	Transaction ID: SA11.13941586
	City State Zip Code FREMONT CA 94536-3326	Amount of Each Receipt this Period 26.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer CHICAGO TITLE CO.	Occupation ESCROW OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00	

B.	Full Name (Last, First, Middle Initial) NORMAN SILVERDALE	Date of Receipt MM / DD / YYYY 11 / 22 / 2010
	Mailing Address 177 CAMELOT ARMS BLDG. U	Transaction ID: SA11.13972850
	City State Zip Code YORK PA 17406-1868	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer ENSIGN	Occupation U.S. NAVY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 651.00	

C.	Full Name (Last, First, Middle Initial) PAUL SILVIA	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 2121 OLD GATESBURG ROAD SUITE 200	Transaction ID: SA11A.13977532
	City State Zip Code STATE COLLEGE PA 16803	Amount of Each Receipt this Period 1698.02
	FEC ID number of contributing federal political committee. C	IN-KIND CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1698.02	IN-KIND: FOOD, BEVERAGE AND POSTAGE

SUBTOTAL of Receipts This Page (optional)	▶	1924.02
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2051 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
PETER J. SIMIC

Mailing Address 700 S MARIPOSA ST.

City State Zip Code
BURBANK CA 91506-3104

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956157

Amount of Each Receipt this Period
125.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. CLIFFORD SIMMONS

Mailing Address 4900 M 52

City State Zip Code
WILLIAMSTON MI 48895-9563

FEC ID number of contributing federal political committee. **C**

Name of Employer OMEGA FARMS
Occupation RANCHER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 1 / 2 0 1 0

Transaction ID: SA11.13967591

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JAMES P. SIMMONS

Mailing Address 3957 PARADISE VIEW DRIVE
STE 700

City State Zip Code
PARADISE VALLEY AR 85253

FEC ID number of contributing federal political committee. **C**

Name of Employer JAMES P. SIMMONS & ASSOCIATES
Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
345.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961881

Amount of Each Receipt this Period
110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **485.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2052 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. JAMES P. SIMMONS	Date of Receipt MM / DD / YYYY 11 / 02 / 2010
	Mailing Address 3957 PARADISE VIEW DRIVE STE 700	Transaction ID: SA11.13964784
	City State Zip Code PARADISE VALLEY AR 85253	Amount of Each Receipt this Period 35.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer JAMES P. SIMMONS & ASSOCIATES	Occupation PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 345.00	

B.	Full Name (Last, First, Middle Initial) LON SIMMONS	Date of Receipt MM / DD / YYYY 11 / 19 / 2010
	Mailing Address 10 WAILEA EKOLU PL. APT. 1707	Transaction ID: SA11.13972098
	City State Zip Code KIHEI HI 96753-9505	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) MR. REGINALD C. SIMMONS	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address P.O. BOX 251	Transaction ID: SA11.13944511
	City State Zip Code TIMBERON NM 88350-0251	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

SUBTOTAL of Receipts This Page (optional) ►

225.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2053 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. SUSAN D. SIMMONS	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 4036 COUNTRY WAY DR	Transaction ID: SA11.13918666
	City State Zip Code BATON ROUGE LA 70816-7901	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation HOMEMAKER HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 395.00	

B.	Full Name (Last, First, Middle Initial) MS. SUSAN D. SIMMONS	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 4036 COUNTRY WAY DR	Transaction ID: SA11.13934434
	City State Zip Code BATON ROUGE LA 70816-7901	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation HOMEMAKER HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 395.00	

C.	Full Name (Last, First, Middle Initial) MR. WILLAIM SIMMONS	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 351 STAFFODSHIRE RD	Transaction ID: SA11.13949292
	City State Zip Code WINSTON SALEM NC 27104-1511	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	▶	360.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2054 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. ALICE B. SIMONSON	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address PO BOX 512	Transaction ID: SA11.13928114
	City State Zip Code WATFORD CITY ND 58854-0512	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 605.00	

B.	Full Name (Last, First, Middle Initial) MR. ALLEN SIMON	Date of Receipt MM / DD / YYYY 11 / 09 / 2010
	Mailing Address 1383 N CRISS ST	Transaction ID: SA11.13966566
	City State Zip Code CHANDLER AZ 85226-1307	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) MR. ALLEN H. SIMON	Date of Receipt MM / DD / YYYY 10 / 24 / 2010
	Mailing Address 1383 N CRISS STREET	Transaction ID: SA11.13947719
	City State Zip Code CHANDLER AZ 85226-1307	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4600.00	

SUBTOTAL of Receipts This Page (optional)	3575.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2055 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
NEIL I. SIMON

Mailing Address 327E 48TH ST.

City State Zip Code
NEW YORK NY 10036-1348

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	2	/	2	0	1	0

Transaction ID: SA11.13964632

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT C. SIMONDS

Mailing Address 2318 LAKESHORE DR

City State Zip Code
FENNVILLE MI 49408-9713

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	2	/	2	0	1	0

Transaction ID: SA11.13968407

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT C. SIMONDS

Mailing Address 2318 LAKESHORE DR

City State Zip Code
FENNVILLE MI 49408-9713

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	1	0

Transaction ID: SA11.13972148

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **550.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2056 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. RUDY V. SIMONE	Date of Receipt MM / DD / YYYY 11 / 02 / 2010
	Mailing Address 1880 136TH PL. NE	Transaction ID: SA11.13964714
	City State Zip Code BELLEVUE WA 98005-2319	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation WESTERN TILE & MARBLE CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

B.	Full Name (Last, First, Middle Initial) MRS. SHUSHAN TENY SIMON	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 3310 OAKMONT VIEW DR.	Transaction ID: SA11.13940844
	City State Zip Code GLENDALE CA 91208-1158	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) SUZANNE SIMONS	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 3009 CHEVY CHASE DR.	Transaction ID: SA11.13927987
	City State Zip Code HOUSTON TX 77019-3205	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation HOUSTON BULLDOG CAPITAL ASSET MANAGEMENT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	640.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2057 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. VIC S. SIMONIAN

Mailing Address 6 BURNING TREE

City State Zip Code
LAGUNA NIGUEL CA 92677-5305

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945607

Amount of Each Receipt this Period

40.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. WILLIAM SIMON

Mailing Address 11 OXFORD DRIVE

City State Zip Code
ROGERS AR 72758-9530

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WALMART MANAGEMENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Transaction ID: SA11.13960664

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. GENETTE L. SIMPKINS

Mailing Address 646 ILIKAI STREET

City State Zip Code
KAILUA HI 96734-1607

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED RETAIL

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962806

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1590.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2058 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CHARLES R. SIMPSON
Mailing Address 4865 CRAIG STREET

City State Zip Code
MILTON FL 32583-3609

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 265.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0
Transaction ID: SA11.13941917
Amount of Each Receipt this Period
30.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DONALD SIMPSON
Mailing Address 608 W BRADDOCK RD

City State Zip Code
ALEXANDRIA VA 22302-4103

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SIMPSON DEVELOPMENT CO INC REAL ESTATE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0
Transaction ID: SA11.13954454
Amount of Each Receipt this Period
200.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HOWARD M. SIMPSON
Mailing Address 4203 N CHELSEA PL.

City State Zip Code
PEORIA IL 61614-7205

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1092.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0
Transaction ID: SA11.13930285
Amount of Each Receipt this Period
300.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 530.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2059 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. JANICE FREED SIMPSON

Mailing Address 9350 POUNDSTONE PL.

City State Zip Code
GREENWOOD VILLAGE CO 80111-3410

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AURORA MENTAL HEALTH CENT- ER PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 870.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928511

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. JANICE FREED SIMPSON

Mailing Address 9350 POUNDSTONE PL.

City State Zip Code
GREENWOOD VILLAGE CO 80111-3410

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AURORA MENTAL HEALTH CENT- ER PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 870.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955799

Amount of Each Receipt this Period
110.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM D. SIMPSON, SR.

Mailing Address 204 KINGS CROSSING CIR APT 3A

City State Zip Code
BEL AIR MD 21014-3280

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 329.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13929987

Amount of Each Receipt this Period
1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 211.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2060 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. JASPRIT SINGH	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 9 HAZELWOOD LANE	Transaction ID: SA11.13943011
	City State Zip Code GRAND ISLAND NY 14072-3318	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer JMS PROCESS CONTRACTING INC.	Occupation PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 253.00	

B.	Full Name (Last, First, Middle Initial) MS. CATHERINE A. SINKYS	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 465 W END AVE APT 8 B	Transaction ID: SA11.13933675
	City State Zip Code NEW YORK NY 10024	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation SELF-EMPLOYED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1120.00	

C.	Full Name (Last, First, Middle Initial) MS. JANET SIPE	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 2340 BIRCH RD	Transaction ID: SA11.13938287
	City State Zip Code YORK PA 17408-4107	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

SUBTOTAL of Receipts This Page (optional)	370.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2061 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. JANET SIPE

Mailing Address 2340 BIRCH RD

City State Zip Code
YORK PA 17408-4107

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950829

Amount of Each Receipt this Period
20.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. RAMANATHER SIRITHARA

Mailing Address 3001 S HANOVER ST

City State Zip Code
BROOKLYN MD 21225-1233

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945405

Amount of Each Receipt this Period
750.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. JOSEPH B. SIRNA

Mailing Address 2378 BERGEN AVENUE

City State Zip Code
BROOKLYN NY 11234-6612

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938622

Amount of Each Receipt this Period
35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 805.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2062 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. SUSAN R. SITTERLE

Mailing Address 16003 ALSACE

City State Zip Code
SAN ANTONIO TX 78232-2775

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 560.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955800

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. MELIA SKANDALAKIS

Mailing Address 5460 E EL JARDIN ST

City State Zip Code
LONG BEACH CA 90815-4153

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 551.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 1 0

Transaction ID: SA11.13972135

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. DOROTHY SKASKIW

Mailing Address 32433 WILLOW PARKE CIR.

City State Zip Code
FERNANDINA FL 32034-7039

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 406.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959721

Amount of Each Receipt this Period

10.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

260.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2063 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. HENRY SKELSEY

Mailing Address 9 SUNSET LANE

City State Zip Code
RYE NY 10580-1623

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FULTON CAPITAL MANAGEMENT LLC MANAGING PARTNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 1 0

Transaction ID: SA11.13947653

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. NEUSA SKEOCH

Mailing Address 6857 ELAINE WAY

City State Zip Code
SAN DIEGO CA 92120-3932

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 387.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935324

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. NEUSA SKEOCH

Mailing Address 6857 ELAINE WAY

City State Zip Code
SAN DIEGO CA 92120-3932

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 387.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 5 / 2 0 1 0

Transaction ID: SA11.13966254

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

10150.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2064 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. NICK K. SKERIOTIS

Mailing Address 967 TERSHELL TRL

City MOGADORE State OH Zip Code 44260-8895

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PAVING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13946436
 Amount of Each Receipt this Period: 100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILLIAM B. SKILES

Mailing Address 3601 TURTLE CREEK BLVD. APT. 2

City DALLAS State TX Zip Code 75219-5504

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13954571
 Amount of Each Receipt this Period: 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID B. SKILLMAN

Mailing Address 285 SHADY LN

City BIGFORK State MT Zip Code 59911-6532

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt: 10 / 14 / 2010
Transaction ID: SA11.13930231
 Amount of Each Receipt this Period: 151.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 501.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2065 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. GLEN SKILLRUD	Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 1 0
	Mailing Address 3719 HUNTERS POINT ST	Transaction ID: SA11.13930291
	City State Zip Code SAN ANTONIO TX 78230-1933	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	

B.	Full Name (Last, First, Middle Initial) THOMAS J. SKOCILICH	Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0
	Mailing Address 25949 28TH ST	Transaction ID: SA11.13948483
	City State Zip Code SN BERNRDNO CA 92404-3501	Amount of Each Receipt this Period 101.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

C.	Full Name (Last, First, Middle Initial) MR. BERNARD J. SKOPP	Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 1 0
	Mailing Address 38 JAY CIRCLE	Transaction ID: SA11.13947491
	City State Zip Code FAIRFIELD CT 06825-2450	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional)	▶	276.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2066 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JAMES A. SKRABAK

Mailing Address 4683 FOX MOOR PLACE

City State Zip Code
GREENWOOD IN 46143-9200

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PATNAM COUNTY HOSPITAL ANESTHESIOLOGIST

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940846

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. RUSSELL S. SLADE

Mailing Address 11800 W 49TH. AVE UNIT 234

City State Zip Code
WHEAT RIDGE CO 80033-2191

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930062

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. ROZELLA W. SLAFER

Mailing Address 1708 SE LAWRENCE STREET

City State Zip Code
BENTONVILLE AR 72712-6835

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WAL-MART STORES, INC SENIOR TAX MANAGER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962715

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

285.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2067 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. GARY L. SLATER	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 132 HOLLYWOOD STREET	Transaction ID: SA11.13937026
	City State Zip Code OBERLIN OH 44074-1010	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00	

B.	Full Name (Last, First, Middle Initial) MR. FLOYD W. SLAUBAUGH	Date of Receipt MM / DD / YYYY 10 / 29 / 2010
	Mailing Address 7591 44TH AVE NE	Transaction ID: SA11.13959056
	City State Zip Code WOLFORD ND 58385-9502	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

C.	Full Name (Last, First, Middle Initial) MEREDITH SLAUGHTER	Date of Receipt MM / DD / YYYY 11 / 16 / 2010
	Mailing Address 12392 FM 3271	Transaction ID: SA11.13969217
	City State Zip Code TYLER TX 75704-3820	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

SUBTOTAL of Receipts This Page (optional)	350.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2068 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. GENE SLAVIN

Mailing Address 2225 65TH ST

City State Zip Code
BROOKLYN NY 11204

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BASS INC ACCOUNTANT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946475

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MISS JANICE D. SLAY

Mailing Address 16528 MUNN OVAL

City State Zip Code
CLEVELAND OH 44111-2039

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
OHIO DEPT OF HEALTH REGISTERED DIETITIAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 727.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944042

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MISS JANICE D. SLAY

Mailing Address 16528 MUNN OVAL

City State Zip Code
CLEVELAND OH 44111-2039

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
OHIO DEPT OF HEALTH REGISTERED DIETITIAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 727.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13957731

Amount of Each Receipt this Period
110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

210.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2069 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. ALVIN L. SLAYTON		Date of Receipt
	Mailing Address 279 MIDDLEFIELD LN		<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	LASCASSAS	TN	37085-4669
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: SA11.13945360
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="35.00"/>
		<input type="text" value="235.00"/>	CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MRS. WARREN SLIDER		Date of Receipt
	Mailing Address 2607 WILDWOOD DR.		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	CLARKSVILLE	IN	47129-1641
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: SA11.13960198
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="100.00"/>
		<input type="text" value="311.00"/>	CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MRS. LOIS L. SLIGH		Date of Receipt
	Mailing Address 1627 S. SHORE DRIVE		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	HOLLAND	MI	49423-4435
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: SA11.13963525
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="201.00"/>
		<input type="text" value="301.00"/>	CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="336.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2070 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. PATRICIA A. SLOAN

Mailing Address 40 E. 94TH STREET
APARTMENT 24F

City NEW YORK State NY Zip Code 10128-0740

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 405.00

Date of Receipt 10 / 25 / 2010
Transaction ID: SA11.13947762
Amount of Each Receipt this Period 105.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. STEWART SLOAN

Mailing Address 11101 N 78TH. ST.

City OMAHA State NE Zip Code 68122-4070

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13949113
Amount of Each Receipt this Period 200.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. D. DAVID SLOSBURG

Mailing Address 10040 REGENCY CIRCLE

City OMAHA State NE Zip Code 68114-3723

FEC ID number of contributing federal political committee. **C**

Name of Employer SLOSBURG Occupation PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 25 / 2010
Transaction ID: SA11.13951059
Amount of Each Receipt this Period 5000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 5305.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2071 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RICHARD SLOBURG

Mailing Address 10040 REGENCY CIRCLE

City OMAHA State NE Zip Code 68114-3723

FEC ID number of contributing federal political committee. **C**

Name of Employer SLOBURG Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13951060
 Amount of Each Receipt this Period: 5000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JEFFREY SLOVAK

Mailing Address 59 OLD FRANKFORT WAY APT 314

City FRANKFORT State IL Zip Code 60423-1729

FEC ID number of contributing federal political committee. **C**

Name of Employer GOVERNORS STATE UNIVERSITY Occupation COLLEGE ADMINISTRATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13940761
 Amount of Each Receipt this Period: 50.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. RONALD SMAHA

Mailing Address 1377 CHESTNUT ST.

City WEST BEND State WI Zip Code 53095-3007

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13952200
 Amount of Each Receipt this Period: 25.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 5075.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2072 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DR. RONALD SMAHA

Mailing Address 1377 CHESTNUT ST.

City State Zip Code
WEST BEND WI 53095-3007

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953249

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ROBERT T. SMALES

Mailing Address 4 CLARA COURT

City State Zip Code
GROVELAND MA 01834-1430

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 303.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928676

Amount of Each Receipt this Period

39.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. HOA T. SMALL

Mailing Address 17393 FOUR SEASONS DR

City State Zip Code
DUMFRIES VA 22025-1851

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937260

Amount of Each Receipt this Period

35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

124.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2073 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. HOA T. SMALL
Mailing Address 17393 FOUR SEASONS DR
City DUMFRIES State VA Zip Code 22025-1851
FEC ID number of contributing federal political committee. **C**
Name of Employer HOMEMAKER Occupation HOMEMAKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00
Date of Receipt 10 / 21 / 2010
Transaction ID: SA11.13945691
Amount of Each Receipt this Period 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LELAND F. SMALL
Mailing Address 332 MILLBROOK DR
City NORMAN State OK Zip Code 73072-4750
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 11 / 19 / 2010
Transaction ID: SA11.13972025
Amount of Each Receipt this Period 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PATSY SMALL
Mailing Address P.O. BOX 470082
City FT. WORTH State TX Zip Code 76147-0082
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 10 / 30 / 2010
Transaction ID: SA11.13960663
Amount of Each Receipt this Period 250.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 400.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2074 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RICHARD P. SMALL

Mailing Address 1585 E 22ND ST.

City State Zip Code
TULSA OK 74114-1305

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942979

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT C. SMELKER

Mailing Address P.O. BOX 25638

City State Zip Code
HONOLULU HI 96825-0638

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation ARCHITECT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13965342

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ALLANA SMELSER

Mailing Address 1343 SE MAIN ST

City State Zip Code
PAOLI IN 47454-9775

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931906

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **750.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2075 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. LARRY L. SMERGLIA

Mailing Address 9471 LAKEWOOD DR NE

City State Zip Code
MINERAL CITY OH 44656-9085

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MERRILL LYNCH FINANCIAL ADVISOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13935681
Amount of Each Receipt this Period: 250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MARIO SMIAJLS

Mailing Address 1422 MURPHY DR

City State Zip Code
RICHARDSON TX 75082

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 11 / 18 / 2010
Transaction ID: SA11.13971192
Amount of Each Receipt this Period: 500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOHN E. SMIDEBUSH

Mailing Address 1063 DEL RIO WAY

City State Zip Code
MORAGA CA 94556-2032

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13939599
Amount of Each Receipt this Period: 20.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 770.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2076 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ALAN M. SMITH

Mailing Address 724 MILL WALK NW

City ATLANTA State GA Zip Code 30327-1534

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13941329
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ANN COIT SMITH

Mailing Address 8404 MILE TREE DRIVE

City FORT SMITH State AR Zip Code 72903-4319

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13945316
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. BAKER A. SMITH

Mailing Address 3360 E TERRELL BRANCH CT SE

City MARIETTA State GA Zip Code 30067-5164

FEC ID number of contributing federal political committee. **C**

Name of Employer BDO CONSULTING
Occupation MANAGEMENT CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13946856
Amount of Each Receipt this Period: 250.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 375.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2077 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) BARBARA SMITH	Date of Receipt MM / DD / YYYY 11 / 16 / 2010
	Mailing Address 49 FAIRWAY LN.	Transaction ID: SA11.13969209
	City State Zip Code LITTLETON CO 80123-6648	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

B.	Full Name (Last, First, Middle Initial) MR. BARRY A. SMITH	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 903 MCDOWELL DR	Transaction ID: SA11.13955848
	City State Zip Code GREENSBORO NC 27408-6719	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

C.	Full Name (Last, First, Middle Initial) MS. BEVERLY DAWN SMITH	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 1 PENNSYLVANIA PL APT 304	Transaction ID: SA11.13933683
	City State Zip Code OTTUMWA IA 52501-2177	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 206.00	

SUBTOTAL of Receipts This Page (optional)	215.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2078 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. BEVERLY DAWN SMITH

Mailing Address 1 PENNSYLVANIA PL APT 304

City State Zip Code
OTTUMWA IA 52501-2177

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
206.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 19 / 2010

Transaction ID: SA11.13939934

Amount of Each Receipt this Period

15.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MISS BRENDA SMITH

Mailing Address 6327 BURCHFIELD AVENUE

City State Zip Code
PITTSBURGH PA 15217-2732

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 18 / 2010

Transaction ID: SA11.13937468

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. CARL C. SMITH

Mailing Address 16779 THOMAS WHITE DR

City State Zip Code
RIVERSIDE CA 92518-2925

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation RETIRED

Aggregate Year-to-Date ▼
266.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 19 / 2010

Transaction ID: SA11.13939635

Amount of Each Receipt this Period

30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

145.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2079 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CARL C. SMITH

Mailing Address 16779 THOMAS WHITE DR

City RIVERSIDE State CA Zip Code 92518-2925

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt: 11 / 22 / 2010
Transaction ID: SA11.13972740
Amount of Each Receipt this Period: 35.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. CHARCEY SMITH

Mailing Address 532 OAK GROVE ROAD

City ROGERSVILLE State TN Zip Code 37857-3456

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 322.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13946486
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. CHARCEY SMITH

Mailing Address 532 OAK GROVE ROAD

City ROGERSVILLE State TN Zip Code 37857-3456

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 322.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13949032
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 85.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2080 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. CHARCEY SMITH

Mailing Address 532 OAK GROVE ROAD

City State Zip Code
ROGERSVILLE TN 37857-3456

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 322.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955477

Amount of Each Receipt this Period
20.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. CHARCEY SMITH

Mailing Address 532 OAK GROVE ROAD

City State Zip Code
ROGERSVILLE TN 37857-3456

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 322.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958999

Amount of Each Receipt this Period
10.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. CHARAD P. SMITH, JR.

Mailing Address P.O. BOX 7
UNIT 1009

City State Zip Code
RAND CO 80473

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940587

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 230.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2081 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. CINDY SMITH

Mailing Address 5660 BELEWS CREEK RD

City State Zip Code
WALKERTOWN NC 27051-9764

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UNEMPLOYED UNEMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt
MM / DD / YYYY
11 / 19 / 2010

Transaction ID: SA11.13970038

Amount of Each Receipt this Period
110.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CLARENCE R. SMITH

Mailing Address 575 OSGOOD ST

City State Zip Code
NORTH ANDOVER MA 01845

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13929069

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CLAUDE W. SMITH

Mailing Address 216 1/2 E PIERCE ST.

City State Zip Code
MANGUM OK 73554-4227

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1334.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13937729

Amount of Each Receipt this Period
35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 195.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2082 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. CLAUDE W. SMITH

Mailing Address 216 1/2 E PIERCE ST.

City State Zip Code
MANGUM OK 73554-4227

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1334.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944592

Amount of Each Receipt this Period
35.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. CLAUDE W. SMITH

Mailing Address 216 1/2 E PIERCE ST.

City State Zip Code
MANGUM OK 73554-4227

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1334.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950389

Amount of Each Receipt this Period
85.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. CLAUDE W. SMITH

Mailing Address 216 1/2 E PIERCE ST.

City State Zip Code
MANGUM OK 73554-4227

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1334.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954775

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

160.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2083 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. CLAUDE W. SMITH	Date of Receipt MM / DD / YYYY 11 / 09 / 2010
	Mailing Address 216 1/2 E PIERCE ST.	Transaction ID: SA11.13967239
	City MANGUM State OK Zip Code 73554-4227	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1334.00	

B.	Full Name (Last, First, Middle Initial) MR. DANIEL SMITH	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 10 NEST DRIVE	Transaction ID: SA11.13965295
	City WESTERLY State RI Zip Code 02891-4916	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer AMETEK Occupation ENGINEER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 410.00	

C.	Full Name (Last, First, Middle Initial) MRS. DAYON SMITH	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address RR 2 BOX 66	Transaction ID: SA11.13929035
	City ARNETT State OK Zip Code 73832-9413	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer HOMEMAKER Occupation HOMEMAKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

SUBTOTAL of Receipts This Page (optional)	▶	125.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2084 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DAYTON A. SMITH, JR.
Mailing Address 4375 VARSITY LANE

City State Zip Code
HOUSTON TX 77004-6617

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UNIVERSITY OF HOUSTON PUBLIC BROADCASTING

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 620.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931808
Amount of Each Receipt this Period
110.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DONALD SMITH
Mailing Address 8103 NORTH HOLW APT 129

City State Zip Code
SAN ANTONIO TX 78240-2393

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 280.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956447
Amount of Each Receipt this Period
50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. E GREGORY SMITH
Mailing Address 229 BAVARIAN DRIVE
APARTMENT K.

City State Zip Code
MIDDLETOWN OH 45044-5470

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936314
Amount of Each Receipt this Period
50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 210.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2085 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. EBEN SMITH		Date of Receipt
	Mailing Address 2031 W CALLE PLACIDA		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	TUCSON	AZ	85745-2113
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13929078
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="460.00"/>	<input type="text" value="200.00"/>
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) MR. ELMER E. SMITH		Date of Receipt
	Mailing Address 198 VICTORIA WAY		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	GEORGETOWN	KY	40324-9186
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer RETIRED		Occupation RETIRED	Transaction ID: SA11.13957316
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="360.00"/>	<input type="text" value="100.00"/>
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) MR. ELWOOD LEROY SMITH		Date of Receipt
	Mailing Address 6429 GWIN RD.		<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	OAKLAND	CA	94611-1203
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13950026
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="150.00"/>
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="450.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2086 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. FAYE SMITH

Mailing Address 260 JULIE RD.

City TYRONE State GA Zip Code 30290-2117

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13939567
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. FLOR SMITH

Mailing Address 1509 BONHAM COURT

City IRVING State TX Zip Code 75038-5929

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt: 10 / 14 / 2010
Transaction ID: SA11.13928546
Amount of Each Receipt this Period: 105.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. FLOYD L. SMITH

Mailing Address 4 PETER COOPER RD
APT 9G

City NEW YORK State NY Zip Code 10010-6746

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 10 / 28 / 2010
Transaction ID: SA11.13959834
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 205.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2087 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DR. FREDERICK SMITH	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 10706 BEAVER DAM ROAD	Transaction ID: SA11.13942595
	City State Zip Code HUNT VALLEY MD 21030-2207	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SINCLAIR BROADCAST GROUP, INC. BUSINESS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) GARY SMITH	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 131 PALMETTO CRK	Transaction ID: SA11.13918701
	City State Zip Code ASHVILLE AL 35953-4336	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 271.00	

C.	Full Name (Last, First, Middle Initial) GOODHUE SMITH	Date of Receipt MM / DD / YYYY 11 / 16 / 2010
	Mailing Address 3520 N RIDGE DR	Transaction ID: SA11.13969285
	City State Zip Code WACO TX 76710-1249	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional)	1250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2088 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. GORDON F. SMITH

Mailing Address 8420 NEW HARRISON BRADFORD RD.

City State Zip Code
BRADFORD OH 45308-9505

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13947119

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. GORDON F. SMITH

Mailing Address 8420 NEW HARRISON BRADFORD RD.

City State Zip Code
BRADFORD OH 45308-9505

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 8 / 2 0 1 0

Transaction ID: SA11.13966782

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. GREGORY P. SMITH

Mailing Address 3810 N SOUTHWOOD DRIVE

City State Zip Code
OCONOMOWOC WI 53066-4560

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MAYVILLE LIMESTONE, INC. V.P.

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 209.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942610

Amount of Each Receipt this Period

60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2089 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. H. BLAKE SMITH

Mailing Address 1000 HARMONY LANE

City State Zip Code
FULLERTON CA 92831-1912

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 430.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954027

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
HERBERT SMITH, SR.

Mailing Address 899 CLEVELAND AVE S APT. 304

City State Zip Code
SAINT PAUL MN 55116-1830

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954115

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. JEANNA A. SMITH

Mailing Address PO BOX 6723

City State Zip Code
PARIS TX 75461-6723

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PREMIERE HOME CARE CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13964428

Amount of Each Receipt this Period
300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **375.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2090 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial) JEFFREY SMITH		Date of Receipt MM / DD / YYYY 10 / 21 / 2010
Mailing Address 2503-B PATRIOT WAY		Transaction ID: SA11.13942602
City GREENSBORO	State NC	Zip Code 27408-2750
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 70.00
Name of Employer EPES TRANSPORT SYSTEM	Occupation DISPATCHER	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 490.00	

B.

Full Name (Last, First, Middle Initial) MS. JILL A. SMITH		Date of Receipt MM / DD / YYYY 10 / 29 / 2010
Mailing Address 2300 N ATLANTIC AVE APT 801		Transaction ID: SA11.13959127
City DAYTONA BEACH	State FL	Zip Code 32118-3388
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer MONTEREY GRILL RESTAURANT GROUP IN	Occupation INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

C.

Full Name (Last, First, Middle Initial) JOHN SMITH		Date of Receipt MM / DD / YYYY 10 / 25 / 2010
Mailing Address 147 MC KINLEY AVE		Transaction ID: SA11.13954466
City NORWICH	State CT	Zip Code 06360-3509
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.00	

SUBTOTAL of Receipts This Page (optional)	▶	295.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2091 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. KAREN L. SMITH	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 1809 FREDERICK COURT	Transaction ID: SA11.13918501
	City State Zip Code CHESAPEAKE VA 23321-1962	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) KINGSTON SMITH	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 9813 WINTERCRESS CT	Transaction ID: SA11.13955930
	City State Zip Code VIENNA VA 22182-1479	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation US HOUSE OF REPRESENTATIVES ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) MR. LESTER SMITH	Date of Receipt MM / DD / YYYY 11 / 02 / 2010
	Mailing Address 155 WOODLAND DR	Transaction ID: SA11.13962608
	City State Zip Code PINEHURST NC 28374-8202	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation TOWN CENTER PHARMACY PHARMACIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 335.00	

SUBTOTAL of Receipts This Page (optional)	▶	385.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2092 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
LUCRETIA BREAZEALE SMITH
 Mailing Address 2914 LOW OAK ST.
 City SAN ANTONIO State TX Zip Code 78232-1813
 Date of Receipt 10 / 18 / 2010
 Transaction ID: SA11.13932665
 Amount of Each Receipt this Period 101.00
 CONTRIBUTION
 FEC ID number of contributing federal political committee. C
 Name of Employer SELF-EMPLOYED Occupation WIFE AND MOTHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.00

B. Full Name (Last, First, Middle Initial)
MARLIN R. SMITH
 Mailing Address 2914 LOW OAK ST
 City SAN ANTONIO State TX Zip Code 78232-1813
 Date of Receipt 10 / 20 / 2010
 Transaction ID: SA11.13944083
 Amount of Each Receipt this Period 101.00
 CONTRIBUTION
 FEC ID number of contributing federal political committee. C
 Name of Employer SMITH HAMILTON LLC Occupation OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 401.00

C. Full Name (Last, First, Middle Initial)
MR. MERLYN H. SMITH
 Mailing Address 1100 ROSSEHL LN
 City MONTROSE State CO Zip Code 81401-5379
 Date of Receipt 10 / 14 / 2010
 Transaction ID: SA11.13928000
 Amount of Each Receipt this Period 25.00
 CONTRIBUTION
 FEC ID number of contributing federal political committee. C
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

SUBTOTAL of Receipts This Page (optional) ► 227.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2093 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MERLYN H. SMITH

Mailing Address 1100 ROSSEHL LN

City State Zip Code
MONTROSE CO 81401-5379

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt MM / DD / YYYY
10 / 20 / 2010

Transaction ID: SA11.13938486

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MERLYN H. SMITH

Mailing Address 1100 ROSSEHL LN

City State Zip Code
MONTROSE CO 81401-5379

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt MM / DD / YYYY
11 / 15 / 2010

Transaction ID: SA11.13968027

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MICHAEL D. SMITH

Mailing Address 3400 BENEVA RD

City State Zip Code
SARASOTA FL 34232-4643

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **611.00**

Date of Receipt MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13938429

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) **150.00**

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2094 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MICHAEL D. SMITH

Mailing Address 3400 BENEVA RD

City State Zip Code
SARASOTA FL 34232-4643

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 611.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938456

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PAUL LOUIS SMITH

Mailing Address 201 BAY SHORE AVE UNIT 103

City State Zip Code
LONG BEACH CA 90803-3537

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13945688

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT SMITH

Mailing Address 900 W ALPINE WAY APT. 107

City State Zip Code
SHELTON WA 98584-1217

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1135.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928297

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **280.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2095 / 3187

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT SMITH

Mailing Address **900 W ALPINE WAY APT. 107**

City **SHELTON** State **WA** Zip Code **98584-1217**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1135.00**

Date of Receipt **10 / 14 / 2010**

Transaction ID: SA11.13930055

Amount of Each Receipt this Period **40.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT SMITH

Mailing Address **1154 RAGLEY HALL ROAD N.E.**

City **ATLANTA** State **GA** Zip Code **30319-2512**

FEC ID number of contributing federal political committee. **C**

Name of Employer **P.** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **10 / 28 / 2010**

Transaction ID: SA11.13957706

Amount of Each Receipt this Period **500.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT L. SMITH

Mailing Address **P.O. BOX 1286**

City **MARBLE FALLS** State **TX** Zip Code **78654-1286**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **296.00**

Date of Receipt **10 / 25 / 2010**

Transaction ID: SA11.13953693

Amount of Each Receipt this Period **40.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **580.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2096 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. ROBERT N. SMITH	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 451 TRACY BROWN RD.	Transaction ID: SA11.13959446
	City MAGNOLIA State NC Zip Code 28453-8953	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer SMITH BROS GAS CO Occupation PRESIDENT/SMALL BUSINESS OWNER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00	

B.	Full Name (Last, First, Middle Initial) RODNEY SMITH	Date of Receipt MM / DD / YYYY 10 / 29 / 2010
	Mailing Address 4207 170TH AVE	Transaction ID: SA11.13959216
	City LAKOTA State IA Zip Code 50451-7009	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer BEAKON AND ASSOCIATES AND Occupation INSURANCE AGENT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 270.00	

C.	Full Name (Last, First, Middle Initial) MR. ROGER S. SMITH	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 9624 N LAMPLIGHTER LN # 32W	Transaction ID: SA11.13930467
	City MEQUON State WI Zip Code 53092	Amount of Each Receipt this Period 600.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer A. O. SMITH CORPORATION Occupation MANAGER CORPORATE ADV. & P.A. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional)	720.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2097 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROLAND E. SMITH

Mailing Address **1208 MAEBETH CIR SE**

City **HUNTSVILLE** State **AL** Zip Code **35803-2412**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **10 / 20 / 2010**

Transaction ID: SA11.13944391

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROLAND E. SMITH

Mailing Address **1208 MAEBETH CIR SE**

City **HUNTSVILLE** State **AL** Zip Code **35803-2412**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **10 / 20 / 2010**

Transaction ID: SA11.13944407

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RUSSELL SMITH

Mailing Address **5280 MAIN ST N**

City **ST PETERSBURG** State **FL** Zip Code **33714-2245**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **201.00**

Date of Receipt **10 / 18 / 2010**

Transaction ID: SA11.13936598

Amount of Each Receipt this Period **1.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **201.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2098 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. SALLIE ELLEN SMITH		Date of Receipt
	Mailing Address 430 E 55TH ST		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 5 / 2 0 1 0
	City	State	Zip Code
	KANSAS CITY	MO	64110-2454
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13955177
Name of Employer DALTON'S		Occupation RESOURCE LIBRARIAN	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00	<input type="text"/> 100.00
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) MRS. SHERRY A. SMITH		Date of Receipt
	Mailing Address 3500 SAUSALITO DR		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 0 / 2 0 1 0
	City	State	Zip Code
	CORONA DL MAR	CA	92625-1639
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13944789
Name of Employer HOMEMAKER		Occupation HOMEMAKER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 510.00	<input type="text"/> 510.00
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) MR. TED H. SMITH		Date of Receipt
	Mailing Address 613 RIVERWALK COURT		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 2 / 2 0 1 0
	City	State	Zip Code
	NORMAN	OK	73072-4844
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13951121
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	<input type="text"/> 1000.00
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1610.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2099 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DR. THALES SMITH

Mailing Address 3186 SHADOWBROOK CIR

City State Zip Code
PROVO UT 84604-4420

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952147

Amount of Each Receipt this Period
75.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
WALTER SMITH

Mailing Address P.O. BOX 235

City State Zip Code
MARBURY MD 20658-0235

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PATRIOT APPLIED SCIENCE AND TECHNOLOGY ENGINEERING CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13947082

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. WILLIAM B. SMITH

Mailing Address 433 W APPLETREE CT

City State Zip Code
THIENSVILLE WI 53092-6201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BLOUNT ORTHOPAEDIC CLINIC, LTD. PHYSICIAN/ SURGEON

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943348

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **375.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2100 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
JOHN SMOLNICKY

Mailing Address 1230 TULIP LANE

City State Zip Code
MUNSTER IN 46321-3025

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WONG & SMOLNICKY, P. C. DENTIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918916

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. KATHLEEN REID SMOOT

Mailing Address 186 BAER CREEK DRIVE

City State Zip Code
KAYSVILLE UT 84037-9656

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EDEAVOUR ELEMENTARY MUSIC TEACHER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941063

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. MICHAEL T. SMOOT

Mailing Address 12000 LOTIS LN

City State Zip Code
WILSONS VA 23894-2532

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED INSPECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937068

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **175.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2101 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GERARD A. SMOROWSKI

Mailing Address 2474 E CALLE DEL NORTE DR.

City State Zip Code
GILBERT AZ 85296-8804

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GENERAL DYNAMICS ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930457

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. W W. SMYTH

Mailing Address 142 HERON PT

City State Zip Code
CHESTERTOWN MD 21620-1673

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948813

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM W. SMYTH

Mailing Address 142 HERON PT.

City State Zip Code
CHESTERTOWN MD 21620-1673

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1095.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937255

Amount of Each Receipt this Period
75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **375.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2102 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
LISA SNELL

Mailing Address 433 COOK RD

City State Zip Code
WEATHERFORD TX 76087-9199

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
COOK CHILDREN'S MEDICAL CENTER PT ACCOUNT REPRESENTATIVE

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 325.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943659

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. JANET M. SNIDER

Mailing Address 2783 WYNDGATE CT

City State Zip Code
WESTLAKE OH 44145-2981

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 246.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934283

Amount of Each Receipt this Period
51.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. RICHARD WOOD SNOWDEN

Mailing Address 8238 GERMANTOWN AVENUE

City State Zip Code
PHILADELPHIA PA 19118-3402

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS REAL ESTATE

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 10000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957937

Amount of Each Receipt this Period
10000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10101.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2103 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. ELIZABETH W. SNYDER	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 108 MONTCHANIN RD.	Transaction ID: SA11.13953660
	City State Zip Code WILMINGTON DE 19807-2137	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation RESTAURANTEUR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) DR. NED SNYDER	Date of Receipt MM / DD / YYYY 11 / 02 / 2010
	Mailing Address 901 W 38TH ST SUITE 10	Transaction ID: SA11.13962554
	City State Zip Code AUSTIN TX 78705	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) MR. RICHARD SNYDER	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 5110 PARK LANE	Transaction ID: SA11.13932338
	City State Zip Code DALLAS TX 75220-2144	Amount of Each Receipt this Period 10000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

SUBTOTAL of Receipts This Page (optional)	10700.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2104 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RUSSELL DEAN SNYDER

Mailing Address 18235 N STERLING DR.

City State Zip Code
SURPRISE AZ 85374-3307

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13933558

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RUSSELL DEAN SNYDER

Mailing Address 18235 N STERLING DR.

City State Zip Code
SURPRISE AZ 85374-3307

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13950084

Amount of Each Receipt this Period
30.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. VENETTA L. SNYDER

Mailing Address 10 STRAWBERRY HILL ROAD

City State Zip Code
FEEDING HILLS MA 01030-1130

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 281.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13932685

Amount of Each Receipt this Period
36.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **116.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2105 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) JAMES SOBIESKI		Date of Receipt
	Mailing Address P.O. BOX 4057		<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	JACKSON	WY	83001-4057
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer RETIRED		Occupation RETIRED	Transaction ID: SA11.13938455
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="250.00"/>
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) DOROTHY LOUISE SOCIN		Date of Receipt
	Mailing Address 29267 LAUREL DRIVE		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	FARMINGTON HILLS	MI	48331-2820
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer RETIRED		Occupation RETIRED	Transaction ID: SA11.13933126
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="601.00"/>	<input type="text" value="51.00"/>
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) DR. JEFFERY SOLDATIS		Date of Receipt
	Mailing Address 700 SUGARBUSH DR		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	ZIONSVILLE	IN	46077-1909
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer ORTHOINDY		Occupation PHYSICIAN	Transaction ID: SA11.13932273
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="2250.00"/>	<input type="text" value="250.00"/>
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="551.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2106 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CLIVE H. SOLLITT

Mailing Address P.O. BOX 887

City State Zip Code
WOODINVILLE WA 98072-0887

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958468

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GORDON LINN SOLT

Mailing Address 244 VILLA RD

City State Zip Code
TWIN FALLS ID 83301-8030

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ENTERPRISE RENT-A-CAR CAR PREP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 625.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946869

Amount of Each Receipt this Period
210.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. LARRY S. SOLT

Mailing Address 4154 SW 6TH AVE APT 313

City State Zip Code
TOPEKA KS 66606-2162

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ATRIA SENIOR LIVING GROUP SERVER AND DISHWASHER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 1 0

Transaction ID: SA11.13947634

Amount of Each Receipt this Period
10.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 320.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2107 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. LARRY S. SOLT

Mailing Address 4154 SW 6TH AVE APT 313

City TOPEKA State KS Zip Code 66606-2162

FEC ID number of contributing federal political committee. **C**

Name of Employer ATRIA SENIOR LIVING GROUP Occupation SERVER AND DISHWASHER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 08 / 2010
Transaction ID: SA11.13966018
Amount of Each Receipt this Period 10.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CHERRILL J. SONNTAG

Mailing Address 5102 GREEN LAKE WAY N

City SEATTLE State WA Zip Code 98103-6125

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13935419
Amount of Each Receipt this Period 40.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CHERRILL J. SONNTAG

Mailing Address 5102 GREEN LAKE WAY N

City SEATTLE State WA Zip Code 98103-6125

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13950141
Amount of Each Receipt this Period 40.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 90.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2108 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DR. LIANG Y. SOO

Mailing Address 1 FRIDAY LN

City State Zip Code
CHAPEL HILL NC 27514-3231

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 590.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	1	0

Transaction ID: SA11.13945698

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. ELSIE SOPP

Mailing Address 462 S. 3040 W.

City State Zip Code
LEHI UT 84043-5637

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	5		2	0	1	0

Transaction ID: SA11.13953254

Amount of Each Receipt this Period
110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. EJILEF SORENSEN

Mailing Address 10527 YOLANDA AVE

City State Zip Code
PORTER RANCH CA 91326-3151

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 290.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	8		2	0	1	0

Transaction ID: SA11.13937927

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

235.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2109 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. EJILEF SORENSEN

Mailing Address 10527 YOLANDA AVE

City State Zip Code
PORTER RANCH CA 91326-3151

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948649

Amount of Each Receipt this Period
20.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM W. SORN

Mailing Address 100 HADDONFIELD PL.

City State Zip Code
SYRACUSE NY 13214-1631

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956965

Amount of Each Receipt this Period
105.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. BASSIRIMA SORO

Mailing Address 3633 S DAWSON PL

City State Zip Code
TUCSON AZ 85730-3212

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CPES DIRECT SUPPORT PROVIDER/SINGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13938105

Amount of Each Receipt this Period
30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 155.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2110 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. BASSIRIMA SORO

Mailing Address 3633 S DAWSON PL

City TUCSON State AZ Zip Code 85730-3212

FEC ID number of contributing federal political committee. **C**

Name of Employer CPES Occupation DIRECT SUPPORT PROVIDER/SINGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 10 / 29 / 2010
Transaction ID: SA11.13961756
 Amount of Each Receipt this Period: 60.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MAURINE SORRELL

Mailing Address 4773 SILVER LAKE DR

City EVANS State GA Zip Code 30809-5400

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 11 / 01 / 2010
Transaction ID: SA11.13963667
 Amount of Each Receipt this Period: 70.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ANTONIO SOSA

Mailing Address 320 N CALHOUN ST

City WEST LIBERTY State IA Zip Code 52776-1424

FEC ID number of contributing federal political committee. **C**

Name of Employer NEW YORK DOLLAR STORE Occupation INFO REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt: 11 / 02 / 2010
Transaction ID: SA11.13962492
 Amount of Each Receipt this Period: 55.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 185.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2111 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. HARRIETT R. SOSELY

Mailing Address 604 FAIRVIEW AVE

City State Zip Code
MIDDLESEX NJ 08846-2327

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
485.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 19 / 2010

Transaction ID: SA11.13931620

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. IVOR SOUDER

Mailing Address 10693 AVIONICS PL. SE

City State Zip Code
ELIZABETH IN 47117-8083

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
RETIRED

Aggregate Year-to-Date ▼
660.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 19 / 2010

Transaction ID: SA11.13941081

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DAVID SOULE

Mailing Address 2358 BRABANT DR

City State Zip Code
LAKE ORION MI 48360-1802

FEC ID number of contributing federal political committee. **C**

Name of Employer
QUALIS AUTOMOTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
SALES

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 19 / 2010

Transaction ID: SA11.13932325

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

300.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2112 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. HELEN SPACEK	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 4800 N 68TH. ST. UNIT 241 UNIT 241	Transaction ID: SA11.13960176
	City State Zip Code SCOTTSDALE AZ 85251-1115	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	

B.	Full Name (Last, First, Middle Initial) MR. GINO SPADAFORA	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 24731 JESSICA PL	Transaction ID: SA11.13933061
	City State Zip Code LAGUNA NIGUEL CA 92677-6037	Amount of Each Receipt this Period 251.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation BEA SYSTEMS SALES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 951.00	

C.	Full Name (Last, First, Middle Initial) MR. ERICH L. SPANGENBERG	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 11700 PRESTON ROAD SUITE 660-207	Transaction ID: SA11.13942984
	City State Zip Code DALLAS TX 75230-6112	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation IP NAVIGATION GROUP, LLC ADVISOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	5751.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2113 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CARL L. SPARKS

Mailing Address 13540 TABLE ROCK AVENUE

City BAKERSFIELD State CA Zip Code 93314-8670

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13955055
 Amount of Each Receipt this Period: 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. IDA FRANCES SPARKS

Mailing Address 1673 SCENIC DR.

City DAYTON State OH Zip Code 45414-3046

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13950284
 Amount of Each Receipt this Period: 40.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM A. SPARKS

Mailing Address 4146 S. TROOST PLACE

City TULSA State OK Zip Code 74105-4030

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13938188
 Amount of Each Receipt this Period: 75.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 215.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2114 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. JEAN N. SPAULDING

Mailing Address 2700 SYCAMORE CANYON RD

City State Zip Code
SANTA BARBARA CA 93108-1916

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953157

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GUY M. SPEARMAN, III

Mailing Address 516 DELANNOY AVE.

City State Zip Code
COCOA FL 32922-7814

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13957953

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. CATHY SPECTOR

Mailing Address PO BOX 6732

City State Zip Code
INCLINE VILLAGE NV 89450-6732

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951404

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **950.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2115 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. CORINNE S. SPENCE	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 22834 E CLIFF DR.	Transaction ID: SA11.13918492
	City State Zip Code SANTA CRUZ CA 95062-5449	Amount of Each Receipt this Period 1005.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5525.00	

B.	Full Name (Last, First, Middle Initial) DENISE A. SPENCE	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 114 WOODRIDGE DRIVE	Transaction ID: SA11.13961182
	City State Zip Code KENNETT SQUARE PA 19348-2676	Amount of Each Receipt this Period 1300.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer HOMEMAKER	Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

C.	Full Name (Last, First, Middle Initial) MR. DONALD SPENCE	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 1728 MANOR LANE	Transaction ID: SA11.13948200
	City State Zip Code PLANO TX 75093-4505	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1040.00	

SUBTOTAL of Receipts This Page (optional)	▶	3305.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2116 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
M SPENCER

Mailing Address 507 E HARDING AVE

City State Zip Code
GREENWOOD MS 38930-3119

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951296

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. RICHARD L. SPICER

Mailing Address 75855 ALTAMIRA DR

City State Zip Code
INDIAN WELLS CA 92210-8768

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959085

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. SONYA T. SPIEWAK

Mailing Address 37174 DEVON WICK LANE

City State Zip Code
PURCELLVILLE VA 20132-5056

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3400.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 1 0

Transaction ID: SA11.13967220

Amount of Each Receipt this Period
3400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **3550.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2117 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

BARBARA W. SPILLMAN

Mailing Address P.O. BOX 1187

City State Zip Code
ST FRANCISVLE LA 70775-1187

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 325.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13938265

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT E. SPINHIRNE

Mailing Address 1982 IL ROUTE 73 N

City State Zip Code
LENA IL 61048-9694

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 601.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13947066

Amount of Each Receipt this Period

1.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DANIEL B. SPINNER

Mailing Address 26908 CROWNS COVE LN

City State Zip Code
KINGWOOD TX 77339-6204

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SUPERIOR SHOT PEENING TECHNICIAN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 291.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941361

Amount of Each Receipt this Period

30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

81.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2118 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. DANIEL B. SPINNER	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 26908 CROWNS COVE LN	Transaction ID: SA11.13941505
	City State Zip Code KINGWOOD TX 77339-6204	Amount of Each Receipt this Period 31.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SUPERIOR SHOT PEENING TECHNICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 291.00	

B.	Full Name (Last, First, Middle Initial) MR. EDWARD J. SPITZNAS	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 531 DENNIS COURT SE	Transaction ID: SA11.13960108
	City State Zip Code OLYMPIA WA 98501-5530	Amount of Each Receipt this Period 31.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 341.00	

C.	Full Name (Last, First, Middle Initial) MR. GEORGE SPIX	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 1 MICROSOFT WAY	Transaction ID: SA11.13964498
	City State Zip Code REDMOND WA 98052	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation MICROSOFT ENGINEER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

SUBTOTAL of Receipts This Page (optional)	312.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2119 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. DAVID M. SPOONER	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 1908 N. KENMORE STREET	Transaction ID: SA11.13942501
	City State Zip Code ARLINGTON VA 22207-3709	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SQUIRE SANDERS GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) MR. JAMES SPOTTS	Date of Receipt MM / DD / YYYY 11 / 02 / 2010
	Mailing Address 209 AVENUE A	Transaction ID: SA11.13964976
	City State Zip Code REDONDO BEACH CA 90277-4704	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

C.	Full Name (Last, First, Middle Initial) MR. THOMAS A. SPRENGER	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 12500 WILDCAT COVE CIR	Transaction ID: SA11.13955904
	City State Zip Code ESTERO FL 33928-2088	Amount of Each Receipt this Period 160.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional)	720.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2120 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
WILLIAM SPRIGGS

Mailing Address 45 BALBOA AVE

City State Zip Code
SAN RAFAEL CA 94901-2355

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED FIN. PLANNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 900.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930050

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. DARRYL M. SPRINGS

Mailing Address 408 E FAIR HARBOR LANE

City State Zip Code
HOUSTON TX 77079-2562

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 8 / 2 0 1 0

Transaction ID: SA11.13966663

Amount of Each Receipt this Period
150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ROBERT L. SPRINGFIELD

Mailing Address 812 DEER PARK RD.

City State Zip Code
PORT ANGELES WA 98362-8262

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 258.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13965270

Amount of Each Receipt this Period
15.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

365.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2121 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. ROGER D. SPRING	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 1702 EMERALD PKWY	Transaction ID: SA11.13957353
	City State Zip Code COLLEGE STATION TX 77845-5543	Amount of Each Receipt this Period 35.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	

B.	Full Name (Last, First, Middle Initial) MR. THOMAS SPRINGMAN	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 33980 OAK REST LN.	Transaction ID: SA11.13964391
	City State Zip Code BRIGHTON IL 62012-3719	Amount of Each Receipt this Period 55.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00	

C.	Full Name (Last, First, Middle Initial) JOHNNIE MAE SPURLOCK	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 5273 LORRAINE ST	Transaction ID: SA11.13942781
	City State Zip Code ADDIS LA 70710-2466	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

SUBTOTAL of Receipts This Page (optional)	140.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2122 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. IRENE ST LOUIS

Mailing Address 2432 E COLLIER AVE SE

City GRAND RAPIDS State MI Zip Code 49546-6103

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation BARBER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13937216
 Amount of Each Receipt this Period: 35.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RALPH ST. JOHN

Mailing Address 12736 NORTHERN BLVD

City CORONA State NY Zip Code 11368-1520

FEC ID number of contributing federal political committee. **C**

Name of Employer ST. JOHN ENTERPRISES INC Occupation CONTRACTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 870.00

Date of Receipt: 10 / 28 / 2010
Transaction ID: SA11.13959785
 Amount of Each Receipt this Period: 100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM STACK

Mailing Address 74 E 27TH ST

City BAYONNE State NJ Zip Code 07002-4909

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 681.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13936919
 Amount of Each Receipt this Period: 50.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 185.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2123 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DAVID STAFFORD		Date of Receipt
	Mailing Address 3 MOONE CREEK CIR.		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	SMITHFIELD	VA	23430-1618
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13940794
		Amount of Each Receipt this Period	
		<input type="text" value="150.00"/>	
Name of Employer RETIRED		Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="400.00"/>	

B.	Full Name (Last, First, Middle Initial) MRS. GLYNNE STAFSLIEN		Date of Receipt
	Mailing Address 1016 RUTLEDGE CT.		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	JANESVILLE	WI	53545-1345
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13932759
		Amount of Each Receipt this Period	
		<input type="text" value="51.00"/>	
Name of Employer RETIRED		Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="557.00"/>	

C.	Full Name (Last, First, Middle Initial) H M. STAGGS		Date of Receipt
	Mailing Address 4422 SOUTHCREST RD		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	DALLAS	TX	75229-6360
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13939611
		Amount of Each Receipt this Period	
		<input type="text" value="100.00"/>	
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="310.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="301.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2124 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. BARBARA K. STAHLSCHMIDT

Mailing Address 2709 ESPANOLA AVE

City	State	Zip Code
SARASOTA	FL	34239-4922

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 736.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA11.13931201
 Amount of Each Receipt this Period: 46.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. BARBARA K. STAHLSCHMIDT

Mailing Address 2709 ESPANOLA AVE

City	State	Zip Code
SARASOTA	FL	34239-4922

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 736.00

Date of Receipt: 11 / 09 / 2010
Transaction ID: SA11.13967269
 Amount of Each Receipt this Period: 45.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. BARBARA K. STAHLSCHMIDT

Mailing Address 2709 ESPANOLA AVE

City	State	Zip Code
SARASOTA	FL	34239-4922

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 736.00

Date of Receipt: 11 / 19 / 2010
Transaction ID: SA11.13970935
 Amount of Each Receipt this Period: 35.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 126.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2125 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WAYNE C. STAHLY

Mailing Address 1100 SCENIC LANE

City State Zip Code
LINCOLN NE 68505-2163

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 271.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13932930

Amount of Each Receipt this Period

26.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WAYNE C. STAHLY

Mailing Address 1100 SCENIC LANE

City State Zip Code
LINCOLN NE 68505-2163

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 271.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13954708

Amount of Each Receipt this Period

10.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WAYNE C. STAHLY

Mailing Address 1100 SCENIC LANE

City State Zip Code
LINCOLN NE 68505-2163

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 271.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13954709

Amount of Each Receipt this Period

35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

71.00

TOTAL This Period (last page this line number only) ►

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2126 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RICHARD C. STAHN

Mailing Address 4037 TALL TIMBER RD NE

City State Zip Code
MINERAL CITY OH 44656-8898

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13947347

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RICHARD C. STAHN

Mailing Address 4037 TALL TIMBER RD NE

City State Zip Code
MINERAL CITY OH 44656-8898

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
MM / DD / YYYY
11 / 05 / 2010

Transaction ID: SA11.13966353

Amount of Each Receipt this Period
20.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT N. STALEY

Mailing Address 405 HUTCHINSON AVE

City State Zip Code
IOWA CITY IA 52246-2409

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UNIVERSITY OF IOWA PROFESSOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
11 / 15 / 2010

Transaction ID: SA11.13968036

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 295.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2127 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. DEBORAH T. STALLINGS

Mailing Address 6347 WATERFORD ROAD

City State Zip Code
COLUMBUS GA 31904-2233

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951352

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. ELIZABETH H. STAMFEL

Mailing Address 14240 BEECHWOOD AVE

City State Zip Code
BROOKFIELD WI 53005-6456

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
RETIRED

Aggregate Year-to-Date ▼
291.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939598

Amount of Each Receipt this Period

51.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. RICHARD STANGLER

Mailing Address 6968 BULLOCK DR

City State Zip Code
SAN DIEGO CA 92114-7885

FEC ID number of contributing federal political committee. **C**

Name of Employer
BOWLERS DEPOT

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
MANAGER

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934105

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

201.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2128 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GARY STANISLAWSKI

Mailing Address 2992 EAST 78TH STREET

City State Zip Code
TULSA OK 74136-8732

FEC ID number of contributing federal political committee. **C**

Name of Employer REGENT FINANCIAL SERVICES Occupation PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13948194

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CHARLES L. STANLEY

Mailing Address PO BOX 1250

City State Zip Code
SPRINGDALE AR 72765-1250

FEC ID number of contributing federal political committee. **C**

Name of Employer DESIGN-IT Occupation PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945353

Amount of Each Receipt this Period
360.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ELLSWORTH STANTON

Mailing Address 1225 PARK AVE APT 7C

City State Zip Code
NEW YORK NY 10128

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957415

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **885.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2129 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DR. MICHAEL D. STANTON HICKS	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 11405 CLEARFIELD LN.	Transaction ID: SA11.13960163
	City State Zip Code CHARDON OH 44024-9051	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer GCF	Occupation VICE CHAIR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 645.00	

B.	Full Name (Last, First, Middle Initial) DR. MICHAEL D. STANTON HICKS	Date of Receipt MM / DD / YYYY 11 / 18 / 2010
	Mailing Address 11405 CLEARFIELD LN.	Transaction ID: SA11.13971265
	City State Zip Code CHARDON OH 44024-9051	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer GCF	Occupation VICE CHAIR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 645.00	

C.	Full Name (Last, First, Middle Initial) MR. RICHARD P. STANTON	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 12603 GLEN RD	Transaction ID: SA11.13951111
	City State Zip Code POTOMAC MD 20854-1020	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SUBCOMMITTEE ON INSULAR AFFAIRS	Occupation REPUBLICAN STAFF DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	625.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2130 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

WILLIAM J. STAPLETON

Mailing Address P.O. BOX 1303

City State Zip Code
CENTER HARBOR NH 03226-1303

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918842

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. FRANKLIN F. STARKS, JR.

Mailing Address 512 CLUB LANE

City State Zip Code
LOUISVILLE KY 40207-1407

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943439

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. HERBERT A. STARK

Mailing Address 8301 GREER RD.

City State Zip Code
SHERWOOD AR 72120-1559

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 632.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944114

Amount of Each Receipt this Period

75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

475.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2131 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. HERBERT A. STARK		Date of Receipt																					
	Mailing Address 8301 GREER RD.		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	6		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0		2	6		2	0	1	0														
City State Zip Code SHERWOOD AR 72120-1559		Transaction ID: SA11.13957109																						
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00																						
Name of Employer RETIRED		Occupation RETIRED																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 632.00																						
CONTRIBUTION																								

B.	Full Name (Last, First, Middle Initial) MR. HERBERT A. STARK		Date of Receipt																					
	Mailing Address 8301 GREER RD.		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	7		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0		2	7		2	0	1	0														
City State Zip Code SHERWOOD AR 72120-1559		Transaction ID: SA11.13958329																						
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.00																						
Name of Employer RETIRED		Occupation RETIRED																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 632.00																						
CONTRIBUTION																								

C.	Full Name (Last, First, Middle Initial) MR. HERBERT A. STARK		Date of Receipt																					
	Mailing Address 8301 GREER RD.		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	6		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	1		1	6		2	0	1	0														
City State Zip Code SHERWOOD AR 72120-1559		Transaction ID: SA11.13969210																						
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00																						
Name of Employer RETIRED		Occupation RETIRED																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 632.00																						
CONTRIBUTION																								

SUBTOTAL of Receipts This Page (optional)	141.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2132 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. JULIA STARKWEATHER	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 8 HORSESHOE RIDGE RD.	Transaction ID: SA11.13931513
	City State Zip Code SANDY HOOK CT 06482-1039	Amount of Each Receipt this Period 160.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 270.00

B.	Full Name (Last, First, Middle Initial) MR. DAVID HENRY STASHIK	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 1507 EDITH STREET	Transaction ID: SA11.13942368
	City State Zip Code BERKELEY CA 94703-1123	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SELF-EMPLOYED Occupation PERSONAL TRAINER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2225.00

C.	Full Name (Last, First, Middle Initial) MR. DAVID HENRY STASHIK	Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address 1507 EDITH STREET	Transaction ID: SA11.13961251
	City State Zip Code BERKELEY CA 94703-1123	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SELF-EMPLOYED Occupation PERSONAL TRAINER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2225.00

SUBTOTAL of Receipts This Page (optional)	▶	260.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2133 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. DAVID HENRY STASHIK

Mailing Address 1507 EDITH STREET

City State Zip Code
BERKELEY CA 94703-1123

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PERSONAL TRAINER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2225.00

Date of Receipt
MM / DD / YYYY
11 / 03 / 2010

Transaction ID: SA11.13965124

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DR. PETER STATTI

Mailing Address 1414 S MILLER ST # 12

City State Zip Code
SANTA MARIA CA 93454-6916

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
10 / 20 / 2010

Transaction ID: SA11.13938496

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
CAROLYN STEADMAN

Mailing Address 23375 BURTON ST

City State Zip Code
CANOGA PARK CA 91304-3511

FEC ID number of contributing federal political committee. **C**

Name of Employer KINGS COLLEGE& SEMINARY Occupation PT.TIME CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
10 / 27 / 2010

Transaction ID: SA11.13957610

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **150.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2134 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. CONSTANCE J. STEDMAN	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 1 0
	Mailing Address 510 LAGUNA RD	Transaction ID: SA11.13942585
	City State Zip Code FULLERTON CA 92835-2432	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 286.00	

B.	Full Name (Last, First, Middle Initial) MR. ELIZA E. STEDMAN	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 2 / 2 0 1 0
	Mailing Address P.O.BOX 7	Transaction ID: SA11.13945580
	City State Zip Code HOUSTON TX 77001-0007	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation STEDMAN WEST INTERESTS IN-C. INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5800.00	

C.	Full Name (Last, First, Middle Initial) MR. ELIZA E. STEDMAN	Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 1 0
	Mailing Address P.O.BOX 7	Transaction ID: SA11.13967188
	City State Zip Code HOUSTON TX 77001-0007	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation STEDMAN WEST INTERESTS IN-C. INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5800.00	

SUBTOTAL of Receipts This Page (optional)	660.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2135 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. MYRNA STEELE

Mailing Address 8420 LYRIC COURT

City State Zip Code
ORLANDO FL 32819-4935

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
US GOVT LRET NUCLEAR ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928082

Amount of Each Receipt this Period
400.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM P. STEELE

Mailing Address 336 HOLLYBROOK DR

City State Zip Code
ADVANCE NC 27006-8405

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943533

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOHNNIE STEGEMOLLER

Mailing Address 2419 PLEASANT CIR

City State Zip Code
ARLINGTON TX 76015-4025

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 466.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13929981

Amount of Each Receipt this Period
1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 501.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2136 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JOHNNIE STEGEMOLLER

Mailing Address 2419 PLEASANT CIR

City ARLINGTON State TX Zip Code 76015-4025

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 466.00

Date of Receipt MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13952957

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHNNIE STEGEMOLLER

Mailing Address 2419 PLEASANT CIR

City ARLINGTON State TX Zip Code 76015-4025

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 466.00

Date of Receipt MM / DD / YYYY
11 / 22 / 2010

Transaction ID: SA11.13972730

Amount of Each Receipt this Period
15.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. E STEIGER

Mailing Address 6450 DOUBLE EAGLE DR. APT. 713

City WOODRIDGE State IL Zip Code 60517-1630

FEC ID number of contributing federal political committee. **C**

Name of Employer US DEPT OF EDUCATION Occupation AUDITOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13935468

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 140.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2137 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RENE A. STEIGERWALT

Mailing Address 1 DICKERSON CT

City State Zip Code
CHESTER NJ 07930-2480

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13962991

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MARJORIE M. STEINMETZ

Mailing Address 2462 N PROSPECT AVE APT. 302
APARTMENT 302

City State Zip Code
MILWAUKEE WI 53211-4450

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13950242

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MICHAEL STEINBERG

Mailing Address 7200 NEVIS ROAD

City State Zip Code
BETHESDA MD 20817-4768

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MORGAN LEWIS ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2010

Transaction ID: SA11.13962742

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **350.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2138 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. RICHARD H. STEINER	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 506 HUNT FIELD RD	Transaction ID: SA11.13936906
	City State Zip Code MANAKIN SABOT VA 23103-2912	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

B.	Full Name (Last, First, Middle Initial) MISS BEATRICE M. STELLE	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 2317 KENWOOD AVE	Transaction ID: SA11.13947244
	City State Zip Code WILLIAMSPORT PA 17701-1318	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 361.00	

C.	Full Name (Last, First, Middle Initial) MR. CHARLES L. STELLING	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 46 E CENTURY RD	Transaction ID: SA11.13937658
	City State Zip Code PARAMUS NJ 07652-2805	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional)	325.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2139 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. CHARLES L. STELLING	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 46 E CENTURY RD	Transaction ID: SA11.13960437
	City State Zip Code PARAMUS NJ 07652-2805	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00		

B.	Full Name (Last, First, Middle Initial) MS. CATHERINE A. STEMPER	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 6951 E NICHOLS PL	Transaction ID: SA11.13942582
	City State Zip Code CENTENNIAL CO 80112-3131	Amount of Each Receipt this Period 185.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 485.00		

C.	Full Name (Last, First, Middle Initial) MR. ANDREW STEPHENSON	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 1315 SEAFARER ST	Transaction ID: SA11.13945323
	City State Zip Code VENTURA CA 93001-4251	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		

SUBTOTAL of Receipts This Page (optional)	▶	485.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2140 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. BURL C. STEPHENS

Mailing Address 16400 SOUTH CLIFF RIDGE CIRCLE

City State Zip Code
ANCHORAGE AK 99516-5416

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946588

Amount of Each Receipt this Period
300.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CHARLES R. STEPHENS

Mailing Address P.O. BOX 750007

City State Zip Code
PETALUMA CA 94975-0007

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956744

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. G. PHILIP STEPHENSON

Mailing Address 99 CANAL PLAZA
SUITE 420

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13932260

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **7300.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2141 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JAMES C. STEPHEN

Mailing Address 50 S DERBYSHIRE LN.

City ARLINGTON HEIGHTS State IL Zip Code 60004-6302

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13952821
Amount of Each Receipt this Period: 200.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAMES F. STEPHENSON

Mailing Address 407 1ST AVE S

City SAINT PETERSBURG State FL Zip Code 33715-2234

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13947439
Amount of Each Receipt this Period: 250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JAY B. STEPHENS

Mailing Address 48 AYRSHIRE LN.

City CONCORD State MA Zip Code 01742-4151

FEC ID number of contributing federal political committee. **C**

Name of Employer RAYTHEON COMPANY
Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13946214
Amount of Each Receipt this Period: 250.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 700.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2142 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. JOHN STEPHENSON	Date of Receipt MM / DD / YYYY 10 / 29 / 2010
	Mailing Address 1064 W MILLS ST APT 212	Transaction ID: SA11.13961875
	City State Zip Code COLUMBUS NC 28722-8459	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00

B.	Full Name (Last, First, Middle Initial) MR. JOHN STEPHENSON	Date of Receipt MM / DD / YYYY 11 / 16 / 2010
	Mailing Address 1064 W MILLS ST APT 212	Transaction ID: SA11.13969321
	City State Zip Code COLUMBUS NC 28722-8459	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00

C.	Full Name (Last, First, Middle Initial) MARIE R. STEPHENSON	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 115 FOSTERTOWN RD.	Transaction ID: SA11.13932686
	City State Zip Code LUMBERTON NJ 08048-9626	Amount of Each Receipt this Period 51.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 202.00

SUBTOTAL of Receipts This Page (optional)	▶	141.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2143 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MARIE R. STEPHENSON

Mailing Address 115 FOSTERTOWN RD.

City State Zip Code
LUMBERTON NJ 08048-9626

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
202.00

Date of Receipt
MM / DD / YYYY
11 / 22 / 2010

Transaction ID: SA11.13972899

Amount of Each Receipt this Period
51.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. GORDON H. STERLING

Mailing Address 68 S FLAGSTONE PATH CIR.

City State Zip Code
SPRING TX 77381-6623

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
219.25

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13954136

Amount of Each Receipt this Period
80.25

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JEFFREY W. STERLING

Mailing Address 1128 ROLENA CIR. NW

City State Zip Code
CANTON OH 44708-3279

FEC ID number of contributing federal political committee. **C**

Name of Employer BEAVER EXCAVATING CO
Occupation CONSTRUCTION

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2010

Transaction ID: SA11.13931353

Amount of Each Receipt this Period
110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **241.25**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2144 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
HERBERT I. STERN

Mailing Address 20530 FALCONS LANDING CIR APT

City State Zip Code
STERLING VA 20165-2805

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950138

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN A. STERN

Mailing Address 2303 COWPER ST STREET

City State Zip Code
PALO ALTO CA 94301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED AERONAUTICAL ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955812

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. ANDREE H. STEVENS

Mailing Address 1100 S.W. SKYLINE BLVD.

City State Zip Code
PORTLAND OR 97221-2657

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13947774

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **350.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2145 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. ANGIE STEVENS

Mailing Address 4793 E STATE RD 244

City State Zip Code
RUSHVILLE IN 46173-7712

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959129

Amount of Each Receipt this Period
75.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. BRENT STEVENSON, M.D.

Mailing Address 4676 WALES DRIVE

City State Zip Code
PLANO TX 75024-6313

FEC ID number of contributing federal political committee. **C**

Name of Employer SLEEP MEDICINE ASSOCIATION OF TEXAS
Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13951134

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DAVID STEVENSON

Mailing Address 5611 TIMBER RIDGE DRIVE

City State Zip Code
PROSPECT KY 40059-9313

FEC ID number of contributing federal political committee. **C**

Name of Employer THE STEVENSON COMPANY
Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942946

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **825.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2146 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. GLORIA M. STEVENS
Mailing Address P.O. BOX 423
City CASHIERS State NC Zip Code 28717-0423
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00
Date of Receipt 11 / 08 / 2010
Transaction ID: SA11.13966950
Amount of Each Receipt this Period 90.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. JESSIE L. STEVENSON
Mailing Address 73-180 IRONTREE DR
City PALM DESERT State CA Zip Code 92260-6901
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 501.00
Date of Receipt 10 / 26 / 2010
Transaction ID: SA11.13956194
Amount of Each Receipt this Period 101.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN N. STEVENS
Mailing Address 7 NORWICK CT
City FORKED RIVER State NJ Zip Code 08731-5607
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00
Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13941663
Amount of Each Receipt this Period 101.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 292.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2147 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MARK R. STEVENSON

Mailing Address 372 BUCK AVENUE

City State Zip Code
VACAVILLE CA 95688-3845

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DAVIS JOINT UNIFIED SCHOOL DIST. TEACHER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 410.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959060

Amount of Each Receipt this Period
110.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PAUL S. STEVENS

Mailing Address 630 S FAIRFAX ST.

City State Zip Code
ALEXANDRIA VA 22314-3834

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INVESTMENT COMPANY ISTITUTE PRESIDENT/CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940601

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. THEODORE STEVENS

Mailing Address 11320 MUSETTE CIRCLE

City State Zip Code
ALPHARETTA GA 30009-2127

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
OMYA INC. SALES MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959165

Amount of Each Receipt this Period
175.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 785.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2148 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DONALD G. STEWART

Mailing Address 16565 VILLAGE DRIVE

City State Zip Code
HOUSTON TX 77040-1124

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
STEWART BLOCKS CONSTRUCTION OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1501.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935251

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DONALD P. STEWART

Mailing Address 107 S LAUREL AVE APT. 101-A

City State Zip Code
CHARLOTTE NC 28207-1567

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ARMY MILITARY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13971354

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. ELLEN K. STEWART

Mailing Address 3077 EVANS MILL RD

City State Zip Code
LITHONIA GA 30038-2419

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928884

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 725.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2149 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GORDON W. STEWART
Mailing Address P.O. BOX 474
City SONORA State TX Zip Code 76950-0474
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 352.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13935140
Amount of Each Receipt this Period 2.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GORDON W. STEWART
Mailing Address P.O. BOX 474
City SONORA State TX Zip Code 76950-0474
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 352.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13935326
Amount of Each Receipt this Period 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES M. STEWART
Mailing Address 4615 LENAPE LN
City LAFAYETTE HL State PA Zip Code 19444-1026
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13933473
Amount of Each Receipt this Period 400.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 502.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2150 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JEFF T. STEWART

Mailing Address P.O. BOX 306

City

WESTMORELAND

State

KS

Zip Code

66549-0306

FEC ID number of contributing federal political committee.

C

Name of Employer
STEWART TRUCKING INC

Occupation
TRUCK DRIVER/OWNER

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

451.00

Date of Receipt

MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13939035

Amount of Each Receipt this Period

251.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

VERA M. STEWART

Mailing Address 712 4TH. AVE

City

FAYETTEVILLE

State

TN

Zip Code

37334-2124

FEC ID number of contributing federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

271.00

Date of Receipt

MM / DD / YYYY
10 / 14 / 2010

Transaction ID: SA11.13929938

Amount of Each Receipt this Period

1.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

VERA M. STEWART

Mailing Address 712 4TH. AVE

City

FAYETTEVILLE

State

TN

Zip Code

37334-2124

FEC ID number of contributing federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

271.00

Date of Receipt

MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13945898

Amount of Each Receipt this Period

35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

287.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2151 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
VERA M. STEWART

Mailing Address 712 4TH. AVE

City State Zip Code
FAYETTEVILLE TN 37334-2124

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 271.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948761

Amount of Each Receipt this Period
35.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. RUTH STEYN

Mailing Address 3356 WHIPPOORWILL LN

City State Zip Code
OXFORD MS 38655-5311

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 254.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13961207

Amount of Each Receipt this Period
39.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. ELEANOR K. STICHMAN

Mailing Address 1101 BABCOCK BLVD.

City State Zip Code
BILLINGS MT 59105-2221

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 202.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963926

Amount of Each Receipt this Period
60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

134.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2152 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GERALD H. STICKLER

Mailing Address 255 HEDGEWICK LN.

City State Zip Code
WRIGHTSVILLE PA 17368-9159

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
OCENCO INC SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13971469

Amount of Each Receipt this Period
60.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LEROY STICKEL, JR.

Mailing Address P.O. BOX 1090

City State Zip Code
KILLEN AL 35645-1090

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936975

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ALAN STIEHLER

Mailing Address 46 HEBERLE RD

City State Zip Code
ROCHESTER NY 14609-1704

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SRF AND ASSOCIATES TRAFFIC ENGINEERING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950171

Amount of Each Receipt this Period
10.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 120.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2153 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. BONNIE J. STILLMAN		Date of Receipt
	Mailing Address 525 S MAIN ST		<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	PLAINFIELD	WI	54966-9654
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer RETIRED		Occupation RETIRED	Transaction ID: SA11.13944804
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="230.00"/>	<input type="text" value="15.00"/>
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) MS. CHERYL STINE		Date of Receipt
	Mailing Address 7548 HIGHTOWER DRIVE		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	NORTH RICHLAND HIL	TX	76182-3824
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13964102
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="205.00"/>	<input type="text" value="70.00"/>
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) MRS. KATHLEEN STINES		Date of Receipt
	Mailing Address 432 WESTWOOD LN.		<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	PUEBLO	CO	81005-1145
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer RETIRED		Occupation RETIRED	Transaction ID: SA11.13948699
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="211.00"/>	<input type="text" value="25.00"/>
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="110.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2154 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
WILLIAM P. STINE

Mailing Address P.O. BOX 378

City LIBBY State MT Zip Code 59923-0378

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13945911
 Amount of Each Receipt this Period: 200.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CHARLES D. STIS

Mailing Address 11612 HOLLY WALK DR.

City SAINT LOUIS State MO Zip Code 63146-4229

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13945054
 Amount of Each Receipt this Period: 50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. ADRIENNE STOCK

Mailing Address 19108 PACIFIC COAST HWY.

City MALIBU State CA Zip Code 90265-5407

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation DEVELOPER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13948340
 Amount of Each Receipt this Period: 100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 350.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2155 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GENE STOCKER, JR.
Mailing Address 1864 WALNUT GROVE DRIVE
City State Zip Code
STATE COLLEGE PA 16801-8440
FEC ID number of contributing federal political committee. **C**
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13942505
Amount of Each Receipt this Period 1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOSEPH L. STOCKING
Mailing Address 550 N KINGSBURY ST APT 517
City State Zip Code
CHICAGO IL 60654-5763
FEC ID number of contributing federal political committee. **C**
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 211.00
Date of Receipt 11 / 02 / 2010
Transaction ID: SA11.13962689
Amount of Each Receipt this Period 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MARY A. STOCKMAN
Mailing Address P.O. BOX 341
City State Zip Code
BOZMAN MD 21612-0341
FEC ID number of contributing federal political committee. **C**
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 251.00
Date of Receipt 11 / 18 / 2010
Transaction ID: SA11.13971227
Amount of Each Receipt this Period 1.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1101.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2156 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MARY A. STOCKMAN
 Mailing Address P.O. BOX 341
 City State Zip Code
 BOZMAN MD 21612-0341
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 1 8 / 2 0 1 0
Transaction ID: SA11.13971234
 Amount of Each Receipt this Period
 50.00
 CONTRIBUTION
 Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
 Occupation INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 251.00

B. Full Name (Last, First, Middle Initial)
MR. REX E. STOCKARD
 Mailing Address 2428 N JEFFERSON ST
 City State Zip Code
 STILLWATER OK 74075-2102
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 8 / 2 0 1 0
Transaction ID: SA11.13957661
 Amount of Each Receipt this Period
 210.00
 CONTRIBUTION
 Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
 Occupation INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 310.00

C. Full Name (Last, First, Middle Initial)
MR. JOHN H. STODDARD
 Mailing Address 8701 ANCHORAGE DRIVE
 City State Zip Code
 MIRAMAR BEACH FL 32550-7840
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 5 / 2 0 1 0
Transaction ID: SA11.13955091
 Amount of Each Receipt this Period
 50.00
 CONTRIBUTION
 Name of Employer HICKORY CREEK
 Occupation HEALTH CARE MANAGER
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

SUBTOTAL of Receipts This Page (optional) ► 310.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2157 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOHN H. STODDARD

Mailing Address 8701 ANCHORAGE DRIVE

City State Zip Code
MIRAMAR BEACH FL 32550-7840

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HICKORY CREEK HEALTH CARE MANAGER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
MM / DD / YYYY
11 / 09 / 2010

Transaction ID: SA11.13966523

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. UDELL A. STODDARD

Mailing Address 227 RIVER ST

City State Zip Code
BETHEL VT 05032-9487

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
MM / DD / YYYY
11 / 12 / 2010

Transaction ID: SA11.13968245

Amount of Each Receipt this Period
30.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ERNEST L. STOFFEL, JR.

Mailing Address 2048 WILLIE PACE RD

City State Zip Code
BURLINGTON NC 27217-7802

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 360.00

Date of Receipt
MM / DD / YYYY
10 / 20 / 2010

Transaction ID: SA11.13943225

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 180.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2158 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. ERNEST L. STOFFEL, JR.	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 2048 WILLIE PACE RD	Transaction ID: SA11.13945373
	City State Zip Code BURLINGTON NC 27217-7802	Amount of Each Receipt this Period 160.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

B.	Full Name (Last, First, Middle Initial) JOHN F. STOKES, M.D.	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 226 LONE TREE	Transaction ID: SA11.13940719
	City State Zip Code BOERNE TX 78006-8874	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

C.	Full Name (Last, First, Middle Initial) MS. SALLY J. STOKES	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 39350 TOKAY STREET	Transaction ID: SA11.13941311
	City State Zip Code CHERRY VALLEY CA 92223-4325	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	330.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2159 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. LYNN E. STOLLER

Mailing Address 15521 E. 1830 NORTH ROAD

City State Zip Code
PONTIAC IL 61764-3183

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
STOLLER INTERNATIONAL VICE PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13931535
Amount of Each Receipt this Period: 200.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LOREN STOLTZ

Mailing Address 211 YORKSHIRE CRESCENT

City State Zip Code
THOMASVILLE GA 31792-8722

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13945117
Amount of Each Receipt this Period: 30.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. LLOYD STONE

Mailing Address 1452 N CR 1030E

City State Zip Code
CHANDLERVILLE IL 62627-8507

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LLOYD STONE FARMS OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt: 11 / 15 / 2010
Transaction ID: SA11.13968841
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 255.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2160 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. MARVIN STONER	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 115 BLACK BEAR RD	Transaction ID: SA11.13951425
	City State Zip Code QUARRYVILLE PA 17566-8900	Amount of Each Receipt this Period 55.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SELF-EMPLOYED SOIL TESTING CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

B.	Full Name (Last, First, Middle Initial) SUSAN K. STONE	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 1336 W SHADOWLAWN ST	Transaction ID: SA11.13951410
	City State Zip Code SPRINGFIELD MO 65810-2795	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation HAMMERS AUTO WORKS REPAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

C.	Full Name (Last, First, Middle Initial) MR. WALDEMAR D. STOPKEY	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 7409 STONECLIFF DRIVE APT 103	Transaction ID: SA11.13950876
	City State Zip Code RALEIGH NC 27615-7749	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.00	

SUBTOTAL of Receipts This Page (optional)	195.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2161 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. AUDIE STOREY

Mailing Address 291 HEATHER LN

City State Zip Code
HOWARD CO 81233-9615

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928018

Amount of Each Receipt this Period
35.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT STOTT

Mailing Address 936 CHURCH ST

City State Zip Code
LAYTON UT 84041-2540

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13947796

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JERROLD G. STOUT

Mailing Address 54 PARK ST

City State Zip Code
BORDENTOWN NJ 08505-1354

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13969574

Amount of Each Receipt this Period
35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **110.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2162 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. J. STOVALL

Mailing Address 520 DOUGLAS BLVD

City State Zip Code
TYLER TX 75702-8307

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TRINITY MOTHER FRANCES HEALTH SYSTEM INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	1	0

Transaction ID: SA11.13931508

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAMES A. STOWE

Mailing Address 10315 E ROSE GLEN DR.

City State Zip Code
CLAREMORE OK 74019-3822

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 280.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	2	/	2	0	1	0

Transaction ID: SA11.13962642

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GARY STRADER

Mailing Address 545 RAVEN CIRCLE

City State Zip Code
BROWNSBURG IN 46112-7694

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PENTERA GROUP, INC. MANAGER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	5	/	2	0	1	0

Transaction ID: SA11.13928463

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **640.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2163 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
GARY STRADER

Mailing Address 545 RAVEN CIRCLE

City State Zip Code
BROWNSBURG IN 46112-7694

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PENTERA GROUP, INC. MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 1 0

Transaction ID: SA11.13947646

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ADA A. STRASENBURGH

Mailing Address P.O. BOX 608

City State Zip Code
OCEAN VIEW NJ 08230-0608

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934995

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. JEAN STRATEMANN

Mailing Address 8035 GARDEN OAKS DR.

City State Zip Code
SAN ANTONIO TX 78266-2692

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 395.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931658

Amount of Each Receipt this Period
185.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 385.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2164 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MARK STRATON

Mailing Address 3234 FOXVALE DRIVE

City OAKTON State VA Zip Code 22124-2261

FEC ID number of contributing federal political committee. **C**

Name of Employer SIEMENS ENTERPRISE COMMUNICATIONS, INC Occupation SVP, GLOBAL SOLUTIONS MARKETING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 27 / 2010

Transaction ID: SA11.13955963

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CHARLES T. STRAUSS

Mailing Address 3108 CASTLETON CT

City OAKTON State VA Zip Code 22124-1763

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 10 / 21 / 2010

Transaction ID: SA11.13946880

Amount of Each Receipt this Period 50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. ELEANOR STRAUSS

Mailing Address 1007 9TH ST

City CLAY CENTER State KS Zip Code 67432-2600

FEC ID number of contributing federal political committee. **C**

Name of Employer YO Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 28 / 2010

Transaction ID: SA11.13960312

Amount of Each Receipt this Period 35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1085.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2165 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. ELEANOR STRAUSS

Mailing Address 1007 9TH ST

City State Zip Code
CLAY CENTER KS 67432-2600

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
YO INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 1 0

Transaction ID: SA11.13966341

Amount of Each Receipt this Period
35.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GUNDARS STRAUTNIEKS

Mailing Address 10959 KURZEME RD.

City State Zip Code
THREE RIVERS MI 49093-8540

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963980

Amount of Each Receipt this Period
35.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HAMILTON W. STRAYER

Mailing Address P.O. BOX 1031

City State Zip Code
ERIE PA 16512-1031

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ERIE STRAYER CO. CHAIRMAN

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963700

Amount of Each Receipt this Period
150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 220.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2166 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) RAYMOND L. STREIGHT	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 205 ADONIS CIR	Transaction ID: SA11.13955872
	City State Zip Code MCKINNEY TX 75070-5882	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 535.00	

B.	Full Name (Last, First, Middle Initial) MR. DON STRETESKY	Date of Receipt MM / DD / YYYY 10 / 29 / 2010
	Mailing Address 14750 COUNTY ROAD 61	Transaction ID: SA11.13959166
	City State Zip Code JULESBURG CO 80737-9623	Amount of Each Receipt this Period 105.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 415.00	

C.	Full Name (Last, First, Middle Initial) MR. DALE K. STRIMPLE	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 4400 LONGFELLOW DR.	Transaction ID: SA11.13942950
	City State Zip Code PLANO TX 75093-3217	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer MCKESSON CORP	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional)	355.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2167 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. WILLIAM STRITTMATTER

Mailing Address **334 BRAMBLY HEDGE CIRCLE**

City **FAIRFIELD** State **CT** Zip Code **06824-7020**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GE** Occupation **CHIEF RISK OFFICER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt **10 / 15 / 2010**

Transaction ID: SA11.13932341

Amount of Each Receipt this Period **2000.00**

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. LINDA K. STROBEL

Mailing Address **1131 NE 1075TH ROAD**

City **CONCORDIA** State **MO** Zip Code **64020-7317**

FEC ID number of contributing federal political committee. **C**

Name of Employer **STROBEL FARMS** Occupation **FARMER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **10 / 19 / 2010**

Transaction ID: SA11.13941327

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. STEVEN C. STROBEL

Mailing Address **1603 E 25 RD**

City **MARQUETTE** State **NE** Zip Code **68854-4101**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt **10 / 29 / 2010**

Transaction ID: SA11.13959106

Amount of Each Receipt this Period **210.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **2310.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2168 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) PEGGY KELLEY STROCKIS		Date of Receipt
	Mailing Address 79 CEDAR LN.		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	SAN JOSE	CA	95127-2313
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13935405
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Amount of Each Receipt this Period	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="60.00"/>	
Occupation INFORMATION REQUESTED PER BEST EFFORTS		CONTRIBUTION	
Aggregate Year-to-Date ▼		<input type="text" value="230.50"/>	

B.	Full Name (Last, First, Middle Initial) PEGGY KELLEY STROCKIS		Date of Receipt
	Mailing Address 79 CEDAR LN.		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	SAN JOSE	CA	95127-2313
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13935629
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Amount of Each Receipt this Period	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="25.00"/>	
Occupation INFORMATION REQUESTED PER BEST EFFORTS		CONTRIBUTION	
Aggregate Year-to-Date ▼		<input type="text" value="230.50"/>	

C.	Full Name (Last, First, Middle Initial) PEGGY KELLEY STROCKIS		Date of Receipt
	Mailing Address 79 CEDAR LN.		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	SAN JOSE	CA	95127-2313
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13953981
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Amount of Each Receipt this Period	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="60.50"/>	
Occupation INFORMATION REQUESTED PER BEST EFFORTS		CONTRIBUTION	
Aggregate Year-to-Date ▼		<input type="text" value="230.50"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="145.50"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2169 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

PEGGY KELLEY STROCKIS

Mailing Address 79 CEDAR LN.

City State Zip Code
SAN JOSE CA 95127-2313

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
230.50

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954523

Amount of Each Receipt this Period

45.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

GARY STROMBERG

Mailing Address 19 CHADS PLACE

City State Zip Code
CHICO CA 95928-9138

FEC ID number of contributing federal political committee. **C**

Name of Employer
NORTH STATE RADIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

PHYSICIAN

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950509

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. MICHELE STROM

Mailing Address 1215 LINCOLN ST NE

City State Zip Code
MINNEAPOLIS MN 55413-1618

FEC ID number of contributing federal political committee. **C**

Name of Employer
FAIRVIEW

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

LABORATORY TECH

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13969207

Amount of Each Receipt this Period

30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2170 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. ROBERT B. STROM	Date of Receipt MM / DD / YYYY 11 / 05 / 2010
	Mailing Address 921 PRIVATE ROD	Transaction ID: SA11.13966160
	City State Zip Code WINNETKA IL 60093	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation STROM PRODUCTS LTD. PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) MR. FREDERICK W. STRONG, III	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 402 HONEYSUCKLE LN	Transaction ID: SA11.13935793
	City State Zip Code YORKTOWN VA 23693-5708	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation GENERAL DYNAMICS DEFENSE CONTRACTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) MR. WILLIAM A. STRONG	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 6811 BRINKLEY RD	Transaction ID: SA11.13939804
	City State Zip Code PINE BLUFF AR 71603-8618	Amount of Each Receipt this Period 1.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation THE STRONE COMPANY INC. BUSINESS OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 351.00	

SUBTOTAL of Receipts This Page (optional)	701.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2171 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. HOMER DALTON STROOP

Mailing Address 2892 SULPHUR SPRINGS RD

City State Zip Code
MURFREESBORO TN 37129-5853

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13941804
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SALLY STROUP

Mailing Address 7824 DESIREE ST

City State Zip Code
ALEXANDRIA VA 22315-6047

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SCANTRON CORPORATION LAWYER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13932261
Amount of Each Receipt this Period: 250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. KATHRYN STRUNK

Mailing Address 1020 HILLSDALE ST. W

City State Zip Code
TILLAMOOK OR 97141-9367

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 10 / 14 / 2010
Transaction ID: SA11.13918488
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 450.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2172 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. SUSAN STRUNA	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 2280 CHERRY HILLS FARM DR	Transaction ID: SA11.13931680
	City State Zip Code ENGLEWOOD CO 80113-7138	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	

B.	Full Name (Last, First, Middle Initial) MRS. MATTIE B. STUART	Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address 870 LOUIS BENNETT RD.	Transaction ID: SA11.13962886
	City State Zip Code ANGUILLA MS 38721-9490	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00	

C.	Full Name (Last, First, Middle Initial) MRS. MATTIE B. STUART	Date of Receipt MM / DD / YYYY 11 / 02 / 2010
	Mailing Address 870 LOUIS BENNETT RD.	Transaction ID: SA11.13964823
	City State Zip Code ANGUILLA MS 38721-9490	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00	

SUBTOTAL of Receipts This Page (optional)	375.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2173 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. CATHY STUBBS

Mailing Address 2703 FAIRWAY DRIVE

City State Zip Code
SUGAR LAND TX 77478-4018

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957931

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. RONALD C. STUBBE

Mailing Address 806 LAFAYETTE RD

City State Zip Code
DEVILS LAKE ND 58301-8968

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 8 / 2 0 1 0

Transaction ID: SA11.13966818

Amount of Each Receipt this Period

60.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
ROSE MARIE STUBBS

Mailing Address 286 CALDWELL ST.

City State Zip Code
CHILLICOTHE OH 45601-3331

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946031

Amount of Each Receipt this Period

10.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

320.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2174 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ROSE MARIE STUBBS

Mailing Address 286 CALDWELL ST.

City State Zip Code
CHILLICOTHE OH 45601-3331

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	1	0

Transaction ID: SA11.13972255

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. KENNETH J. STUDEMAN

Mailing Address 65523 N CENTERVILLE RD.

City State Zip Code
STURGIS MI 49091-9148

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	1	0

Transaction ID: SA11.13938579

Amount of Each Receipt this Period
220.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CHRIS E. STUECK

Mailing Address 138 ST. FINANS WAY

City State Zip Code
HOUSTON TX 77015-1798

FEC ID number of contributing federal political committee. **C**

Name of Employer CENTERPOINT ENERGY
Occupation SYSTEMS ANALYST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	5	/	2	0	1	0

Transaction ID: SA11.13928275

Amount of Each Receipt this Period
75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **320.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2175 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DAVID L. STUEDLE

Mailing Address 1404 GIRARD DR

City State Zip Code
LOUISVILLE KY 40222-6645

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
KROGER COMPANY ASSISTANT GROCERY MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13948171

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN C. STUMPF

Mailing Address 407 ARLINGTON AVENUE

City State Zip Code
ELMHURST IL 60126-3914

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13939781

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM O. STUMP

Mailing Address 45 PENDLETON DR

City State Zip Code
PINE HAVEN WY 82721-9710

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 840.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2010

Transaction ID: SA11.13931249

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 550.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2176 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. LYNDA STURDEVANT

Mailing Address P.O. BOX 148

City State Zip Code
CLEVELAND MO 64734-0148

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
J.C. PENNY'S CUSTOMER SERVICE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 470.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951321

Amount of Each Receipt this Period
150.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JONI H. STUTZMAN

Mailing Address PO BOX 107

City State Zip Code
HOYT LAKES MN 55750-0107

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
STUTZMAN GROUP INC. PRESIDENT/OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13960780

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JORGE K. SUCCAR

Mailing Address 18701 BUENA VISTA AVE

City State Zip Code
YORBA LINDA CA 92886-4924

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 435.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938578

Amount of Each Receipt this Period
210.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 460.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2177 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MRS. EMILY S. SUDDERTH</p> <p>Mailing Address 1421 N. UNIVERSITY AVE. APT S136</p> <p>City State Zip Code LITTLE ROCK AR 72207-5263</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 215.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0</p> <p>Transaction ID: SA11.13955612</p> <p>Amount of Each Receipt this Period 45.00</p> <p>CONTRIBUTION</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) DR. MERCEDES SULIT</p> <p>Mailing Address 1411 MEADOW GLADE CT</p> <p>City State Zip Code SUGAR LAND TX 77479-4062</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation SELF-EMPLOYED DENTIST</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 1 0</p> <p>Transaction ID: SA11.13940439</p> <p>Amount of Each Receipt this Period 50.00</p> <p>CONTRIBUTION</p>
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<p>C. Full Name (Last, First, Middle Initial) MR. DAINIEL S. SULLIVAN</p> <p>Mailing Address 4943 S PEORIA AVE</p> <p>City State Zip Code TULSA OK 74105-4629</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation DANIEL S SULLIVAN INC PC/- SELF ATTORNEY</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 300.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0</p> <p>Transaction ID: SA11.13947802</p> <p>Amount of Each Receipt this Period 100.00</p> <p>CONTRIBUTION</p>
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SUBTOTAL of Receipts This Page (optional)	195.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2178 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. GERARD C. SULLIVAN	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 60 HILL TOP RD.	Transaction ID: SA11.13945603
	City State Zip Code SOUTHAMPTON NY 11968-3707	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

B.	Full Name (Last, First, Middle Initial) MR. HARLEY C. SULLIVAN	Date of Receipt MM / DD / YYYY 11 / 09 / 2010
	Mailing Address 920 CONGRESS AVE	Transaction ID: SA11.13966552
	City State Zip Code AUSTIN TX 78701-2422	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

C.	Full Name (Last, First, Middle Initial) MR. JAMES C. SULLIVAN	Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address 174 HERRICK RD	Transaction ID: SA11.13960788
	City State Zip Code BOXFORD MA 01921-1927	Amount of Each Receipt this Period 110.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00	

SUBTOTAL of Receipts This Page (optional)	410.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2179 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. JOHN SULLIVAN		Date of Receipt
	Mailing Address 598 E 4TH ST		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 1 / 2 2 / 2 0 1 0
	City	State	Zip Code
	BOSTON	MA	02127-3092
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13972857
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 400.00	<input type="text"/> 100.00 CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) RICHARD A. SULLIVAN		Date of Receipt
	Mailing Address 9921 NEW LONDON DR		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 1 8 / 2 0 1 0
	City	State	Zip Code
	POTOMAC	MD	20854-4846
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13935276
Name of Employer CLASSIC GROUP		Occupation RESIDENTIAL BUILDER/DEVELOPER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 350.00	<input type="text"/> 100.00 CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) RICHARD A. SULLIVAN		Date of Receipt
	Mailing Address 9921 NEW LONDON DR		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 5 / 2 0 1 0
	City	State	Zip Code
	POTOMAC	MD	20854-4846
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13952259
Name of Employer CLASSIC GROUP		Occupation RESIDENTIAL BUILDER/DEVELOPER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 350.00	<input type="text"/> 100.00 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 300.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2180 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT D. SULLIVAN

Mailing Address 4753 LAKEMONT HIMROD ROAD

City State Zip Code
DUNDEE NY 14837-9154

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
327.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	1	0

Transaction ID: SA11.13940187

Amount of Each Receipt this Period
2.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT D. SULLIVAN

Mailing Address 4753 LAKEMONT HIMROD ROAD

City State Zip Code
DUNDEE NY 14837-9154

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
327.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	1	0

Transaction ID: SA11.13962872

Amount of Each Receipt this Period
150.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT J. SULLIVAN, JR.

Mailing Address 2118 EAST 29TH STREET

City State Zip Code
TULSA OK 74114-5422

FEC ID number of contributing federal political committee. **C**

Name of Employer SULLCO
Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	1	0

Transaction ID: SA11.13945247

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1152.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2181 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT SUMINCHT

Mailing Address 1310 E. 10TH STREET

City State Zip Code
MERRILL WI 54452-1547

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929192

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PAUL SUMMERS

Mailing Address 2228 LAKE ALBEMARLE ROAD

City State Zip Code
CHARLOTTEVA VA 22901-5130

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959714

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOE CHAT SUMNER

Mailing Address P.O. BOX 1183

City State Zip Code
VERNON TX 76385-1183

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED FARMER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13948193

Amount of Each Receipt this Period
1500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1725.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2182 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. JOE CHAT SUMNER, III		Date of Receipt
	Mailing Address P.O. BOX 1183		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 8 / 2 0 1 0
	City	State	Zip Code
	VERNON	TX	76385-1183
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13960172
Name of Employer SELF-EMPLOYED		Occupation FARMER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	<input type="text"/> 1000.00
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) MR. WAYNE W. SUMNERS		Date of Receipt
	Mailing Address 2278 FOREST LAKES LANE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 1 4 / 2 0 1 0
	City	State	Zip Code
	STERRETT	AL	35147-8152
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13930387
Name of Employer REAL ESTATE MATRIX		Occupation COMMERCIAL REAL ESTATE APPRAISER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 630.00	<input type="text"/> 180.00
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) FATHER GARY SUMPTER		Date of Receipt
	Mailing Address P.O. BOX 98		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 2 / 2 0 1 0
	City	State	Zip Code
	SCOTIA	CA	95565-0098
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13945372
Name of Employer CHURCH		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	<input type="text"/> 100.00
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1280.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2183 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DELMONT R. SUNDERLAND

Mailing Address 11121 POND RD

City State Zip Code
HUNTINGDON PA 16652-7643

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WORLD MARKETING OF AMERICA INC OWNER/PRESIDENT

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 3750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13937263

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DELMONT R. SUNDERLAND

Mailing Address 11121 POND RD

City State Zip Code
HUNTINGDON PA 16652-7643

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WORLD MARKETING OF AMERICA INC OWNER/PRESIDENT

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 3750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	1	0

Transaction ID: SA11.13945824

Amount of Each Receipt this Period
750.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ROBERT SUNDERLAND

Mailing Address 953 PYRITE AVE

City State Zip Code
HENDERSON NV 89011-3059

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 2834.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	1	0

Transaction ID: SA11.13941767

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1950.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2184 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ROBERT SUNDERLAND

Mailing Address 953 PYRITE AVE

City State Zip Code
HENDERSON NV 89011-3059

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2834.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956721

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
SADTHA SURATTANONT

Mailing Address HC 64 BOX 370

City State Zip Code
ROMNEY WV 26757-9602

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940939

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DONALD KEARN SURGEON

Mailing Address 268 MILAGRA DR.

City State Zip Code
PACIFICA CA 94044-2332

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 301.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952867

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2185 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. GAYLA SURGENT

Mailing Address 888 RAMAPO VALLEY RD

City MAHWAH State NJ Zip Code 07430-2405

FEC ID number of contributing federal political committee. **C**

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt: 11 / 03 / 2010
Transaction ID: SA11.13964568
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. SCOTT SUSKO

Mailing Address 401 9TH STREET, NW SUITE 900

City WASHINGTON State DC Zip Code 20004-2145

FEC ID number of contributing federal political committee. **C**

Name of Employer: NIXON & PEABODY Occupation: ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 11 / 10 / 2010
Transaction ID: SA11.13968705
Amount of Each Receipt this Period: 500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MISS LOUISE SUTHERLAND

Mailing Address P.O. BOX 559

City CLINTWOOD State VA Zip Code 24228-0559

FEC ID number of contributing federal political committee. **C**

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 11 / 04 / 2010
Transaction ID: SA11.13965801
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 625.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2186 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
ELIZABETH H. SUTRO

Mailing Address 3598 JACKSON ST

City State Zip Code
SAN FRANCISCO CA 94118-1808

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13972818

Amount of Each Receipt this Period
150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. DONALD L. SUTTNER

Mailing Address 17101 HWY 1

City State Zip Code
RIDGWAY IL 62979-2008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929062

Amount of Each Receipt this Period
120.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. DONALD O. SUTTON

Mailing Address 2630 PORTOLA DR
SPC 42

City State Zip Code
SANTA CRUZ CA 95062-5061

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 490.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930736

Amount of Each Receipt this Period
80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **350.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2187 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. F. JOSEPH SVEC

Mailing Address 266 CHEESTANA WAY

City LOUDON State TN Zip Code 37774-2527

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13937195
 Amount of Each Receipt this Period: 100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
VITUS SVEN

Mailing Address 400 SAN DIMAS ST

City BAKERSFIELD State CA Zip Code 93301

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 11 / 02 / 2010
Transaction ID: SA11.13964772
 Amount of Each Receipt this Period: 1500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SVEA SVENSSON

Mailing Address 661 41ST ST APT 2C

City BROOKLYN State NY Zip Code 11232-3134

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13936821
 Amount of Each Receipt this Period: 20.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1620.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2188 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
SVEA SVENSSON

Mailing Address 661 41ST ST APT 2C

City State Zip Code
BROOKLYN NY 11232-3134

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 320.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956636

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
SVEA SVENSSON

Mailing Address 661 41ST ST APT 2C

City State Zip Code
BROOKLYN NY 11232-3134

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 320.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 0 / 2 0 1 0

Transaction ID: SA11.13967641

Amount of Each Receipt this Period

40.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. MICHAEL J. SVETLIC

Mailing Address 7111 COUNTRY WOOD LN.

City State Zip Code
KANSAS CITY MO 64152-1199

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED ATTORNEY

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939299

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

190.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2189 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JANET A. SWAN

Mailing Address P.O. BOX 301

City State Zip Code
BENTON PA 17814-0301

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
303.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	1	0

Transaction ID: SA11.13962875

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. EDMUND R. SWANBERG

Mailing Address 152 MICHIGAN ROAD

City State Zip Code
NEW CANAAN CT 06840-2221

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13954950

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. EDMUND R. SWANBERG

Mailing Address 152 MICHIGAN ROAD

City State Zip Code
NEW CANAAN CT 06840-2221

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	1	0

Transaction ID: SA11.13959611

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **250.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2190 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. EDMUND R. SWANBERG

Mailing Address 152 MICHIGAN ROAD

City State Zip Code
NEW CANAAN CT 06840-2221

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13972896

Amount of Each Receipt this Period 50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ALFRED B. SWANSON

Mailing Address 1059 COUNTY STREET 2928

City State Zip Code
TUTTLE OK 73089-3039

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt M M / D D / Y Y Y Y
1 1 / 0 5 / 2 0 1 0

Transaction ID: SA11.13966256

Amount of Each Receipt this Period 175.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JOHN SWANSON

Mailing Address 6745 ROXBOROUGH DR

City State Zip Code
LITTLETON CO 80125-8703

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933421

Amount of Each Receipt this Period 50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 275.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2191 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. VAL JEAN SWANSON

Mailing Address 1338 W. MCKINLEY AVENUE

City POMONA State CA Zip Code 91768-1444

FEC ID number of contributing federal political committee. **C**

Name of Employer ST. PAUL'S LUTH. CHURCH Occupation DIRECTOR OF CHURCH MUSIC

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 410.00

Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13931527
Amount of Each Receipt this Period 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. ESTHER F. SWART

Mailing Address 511 COPHER CT

City EULESS State TX Zip Code 76040-5588

FEC ID number of contributing federal political committee. **C**

Name of Employer OAO TECHNOLOGIES CORP Occupation SITE MGR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13941474
Amount of Each Receipt this Period 51.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. ESTHER F. SWART

Mailing Address 511 COPHER CT

City EULESS State TX Zip Code 76040-5588

FEC ID number of contributing federal political committee. **C**

Name of Employer OAO TECHNOLOGIES CORP Occupation SITE MGR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt 10 / 21 / 2010
Transaction ID: SA11.13945217
Amount of Each Receipt this Period 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 151.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2192 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. ESTHER F. SWART
Mailing Address 511 COPHER CT
City EULESS State TX Zip Code 76040-5588
FEC ID number of contributing federal political committee. **C**
Name of Employer OAO TECHNOLOGIES CORP Occupation SITE MGR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 231.00
Date of Receipt 10 / 21 / 2010
Transaction ID: SA11.13945218
Amount of Each Receipt this Period 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAMES A. SWARTLEY
Mailing Address 608 S BROAD ST
City LANSDALE State PA Zip Code 19446-5249
FEC ID number of contributing federal political committee. **C**
Name of Employer ABINGTON HEALTH LANSDALE HOSPITAL Occupation HOUSEKEEPER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 241.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13933291
Amount of Each Receipt this Period 41.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. MICHAELENE SWARTZ
Mailing Address 113 LANDSDOWN
City WILLIAMSBURG State VA Zip Code 23188-7425
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 530.00
Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13931936
Amount of Each Receipt this Period 25.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 116.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2193 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. ANN L. SWEENEY
 Mailing Address P.O. BOX 281
 City State Zip Code
 POCONO SUMMIT PA 18346-0281
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 1 8 / 2 0 1 0
Transaction ID: SA11.13969526
 Amount of Each Receipt this Period
 40.00
 CONTRIBUTION
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

B. Full Name (Last, First, Middle Initial)
MRS. JANICE MARIE SWEERE
 Mailing Address 5637 WOODLAWN BLVD
 City State Zip Code
 MINNEAPOLIS MN 55417-2667
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 1 5 / 2 0 1 0
Transaction ID: SA11.13968839
 Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ERGOTRON, INC. BUSINESS OWNER
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 9000.00

C. Full Name (Last, First, Middle Initial)
DR. CHRISTOPHER S. SWEET
 Mailing Address 8047 COTSWOLD LN
 City State Zip Code
 CLARKSTON MI 48348-4364
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 9 / 2 0 1 0
Transaction ID: SA11.13961818
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF-EMPLOYED PHYSICIAN
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2500.00

SUBTOTAL of Receipts This Page (optional) ► 6040.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2194 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM R. SWEET

Mailing Address 81 MOUNT TIBURON RD

City State Zip Code
BEL TIBURON CA 94920-1511

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13941070

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN W. SWEEZY, JR.

Mailing Address 1441 SADLIER CIRCLE WEST DR

City State Zip Code
INDIANAPOLIS IN 46239-1057

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CEO CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
11 / 03 / 2010

Transaction ID: SA11.13964385

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. BEVERLY L. SWIFT

Mailing Address 461 FAR VIEW RD

City State Zip Code
DURANGO CO 81303-3610

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13942648

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 565.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2195 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES T. SWIGER

Mailing Address 6918 CINNAMON CIR

City State Zip Code
CHARLOTTE NC 28227-4409

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 287.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13946838
Amount of Each Receipt this Period: 20.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAMES T. SWIGER

Mailing Address 6918 CINNAMON CIR

City State Zip Code
CHARLOTTE NC 28227-4409

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 287.00

Date of Receipt: 11 / 12 / 2010
Transaction ID: SA11.13968041
Amount of Each Receipt this Period: 35.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MIKE L. SWINFORD

Mailing Address 111 E. CHESTNUT #51K

City State Zip Code
CHICAGO IL 60611-6029

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30500.00

Date of Receipt: 11 / 03 / 2010
Transaction ID: SA11.13966024
Amount of Each Receipt this Period: 15000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 15055.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2196 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. EUGENE SWINNERTON	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 643 E FOX HILLS DR	Transaction ID: SA11.13956354
	City State Zip Code BLOOMFIELD HILLS MI 48304-1305	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) MR. ROBERT E. SWITZER, USMC (RET.)	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 205 SAND DOLLAR CV.	Transaction ID: SA11.13957331
	City State Zip Code SNEADS FERRY NC 28460-9114	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer COASTAL CAROLINA COMMUNITY COLLEGE	Occupation INSTRUCTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 610.00	

C.	Full Name (Last, First, Middle Initial) MS. KATHLEEN M. SWNETZEL	Date of Receipt MM / DD / YYYY 11 / 04 / 2010
	Mailing Address 12246 ROUNDWOOD RD UNIT 707	Transaction ID: SA11.13965908
	City State Zip Code TIMONIUM MD 21093-3254	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	250.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2197 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DONALD SWYGERT

Mailing Address 8416 ALYCE PLACE

City State Zip Code
ALEXANDRIA VA 22308-1901

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	1	0

Transaction ID: SA11.13945187

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DONALD SWYGERT

Mailing Address 8416 ALYCE PLACE

City State Zip Code
ALEXANDRIA VA 22308-1901

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	3	/	2	0	1	0

Transaction ID: SA11.13964571

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. LEO O. SYKES

Mailing Address PO BOX 152

City State Zip Code
GARNER IA 50438-0152

FEC ID number of contributing federal political committee. **C**

Name of Employer LEHIGH CEMENT CO Occupation ELECTRICIAN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13929445

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **200.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2198 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
W. STUART SYKES

Mailing Address 1005 COLUMBIA ROAD

City MADISON State WI Zip Code 53705-2105

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 27 / 2010
Transaction ID: SA11.13955993
Amount of Each Receipt this Period: 500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. ROBERT A. SYLVESTER

Mailing Address 10 HIGH ST #205 # 205

City LEWISTON State ME Zip Code 04240-7657

FEC ID number of contributing federal political committee. **C**

Name of Employer R A SYLVESTER, M.D PA Occupation PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4700.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA11.13931260
Amount of Each Receipt this Period: 500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. ROBERT A. SYLVESTER

Mailing Address 10 HIGH ST #205 # 205

City LEWISTON State ME Zip Code 04240-7657

FEC ID number of contributing federal political committee. **C**

Name of Employer R A SYLVESTER, M.D PA Occupation PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4700.00

Date of Receipt: 11 / 04 / 2010
Transaction ID: SA11.13965635
Amount of Each Receipt this Period: 1000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 2000.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2199 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RONALD J. SYLVESTRI

Mailing Address 280 BRONXVILLE ROAD #8A

City BRONXVILLE State NY Zip Code 10708-2818

FEC ID number of contributing federal political committee. **C**

Name of Employer HUDSON VALLEY BANK Occupation BANKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt 10 / 25 / 2010

Transaction ID: SA11.13951915

Amount of Each Receipt this Period 25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DENNIS R. SYMONS

Mailing Address 5 NATALIE DR.

City BUDD LAKE State NJ Zip Code 07828-1017

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 371.00

Date of Receipt 10 / 25 / 2010

Transaction ID: SA11.13954533

Amount of Each Receipt this Period 25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ANTHONY SZAFRANIC

Mailing Address 308 WEST BAY DRIVE

City VENICE State FL Zip Code 34285-1401

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 28 / 2010

Transaction ID: SA11.13959027

Amount of Each Receipt this Period 100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 150.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2200 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. STEPHEN R. SZATKOWSKI		Date of Receipt
	Mailing Address 519 LODGEPOLE DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 0 3 / 2 0 1 0
	City	State	Zip Code
	INCLINE VILLAGE	NV	89451-8400
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13964399
		Amount of Each Receipt this Period	<input type="text"/> 50.00
Name of Employer RETIRED		Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 230.00	

B.	Full Name (Last, First, Middle Initial) DR. RONALD F. SZOPA, DMD		Date of Receipt
	Mailing Address 753 CHESTNUT ST		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 9 / 2 0 1 0
	City	State	Zip Code
	MANCHESTER	NH	03104-3011
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13931725
		Amount of Each Receipt this Period	<input type="text"/> 300.00
Name of Employer RONALD F SZOPA, D M D		Occupation OWNER	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 300.00	

C.	Full Name (Last, First, Middle Initial) MR. TIMOTHY S. SZYBALSKI		Date of Receipt
	Mailing Address 13 INVERLEITH TER		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 7 / 2 0 1 0
	City	State	Zip Code
	MORAGA	CA	94556-1908
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13955854
		Amount of Each Receipt this Period	<input type="text"/> 105.00
Name of Employer PA CONSULTING		Occupation MANAGER	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 375.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 455.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2201 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
BERNADINE SZYDLIK

Mailing Address 2414 BROOKTREE DR.

City HOUSTON State TX Zip Code 77008-1112

FEC ID number of contributing federal political committee. **C**

Name of Employer SOUTH TEXAS EXTERMINATING CO. Occupation OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt: 10 / 19 / 2010

Transaction ID: SA11.13939158

Amount of Each Receipt this Period: 10.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. WALTER J. SZYDLOWSKI

Mailing Address 6475 SUGAR TREE DR.

City SPRING HILL State FL Zip Code 34607-2517

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation INTERNAL MEDICINE PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt: 10 / 21 / 2010

Transaction ID: SA11.13946536

Amount of Each Receipt this Period: 150.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. WALTER J. SZYDLOWSKI

Mailing Address 6475 SUGAR TREE DR.

City SPRING HILL State FL Zip Code 34607-2517

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation INTERNAL MEDICINE PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt: 10 / 26 / 2010

Transaction ID: SA11.13956755

Amount of Each Receipt this Period: 225.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 385.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2202 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. DONALD TAFT	Date of Receipt MM / DD / YYYY 11 / 16 / 2010
	Mailing Address PO BOX 270505	Transaction ID: SA11.13968580
	City State Zip Code CORPUS CHRISTI TX 78427-0505	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation BRUGH COUNTY IND C E O	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

B.	Full Name (Last, First, Middle Initial) MR. ARTHUR R. TAGGART	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 17 TIARA	Transaction ID: SA11.13955869
	City State Zip Code IRVINE CA 92614-7310	Amount of Each Receipt this Period 210.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00	

C.	Full Name (Last, First, Middle Initial) JUDITH FERRELL TAGGART	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 2341 S ODE ST.	Transaction ID: SA11.13958383
	City State Zip Code ARLINGTON VA 22202-1543	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation JT & AINE CHAIRMAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 710.00	

SUBTOTAL of Receipts This Page (optional)	410.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2203 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
SONIA M. TAGLE

Mailing Address 158 TARA RUN

City State Zip Code
WOOLWICH TWP NJ 08085-3026

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 211.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933308

Amount of Each Receipt this Period
31.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SONIA M. TAGLE

Mailing Address 158 TARA RUN

City State Zip Code
WOOLWICH TWP NJ 08085-3026

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 211.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954518

Amount of Each Receipt this Period
30.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL N. TAGLICH

Mailing Address 98 BAY ST

City State Zip Code
SAG HARBOR NY 11963-3165

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TAGLICH BROTHERS BROKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13957621

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **311.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2204 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. PAULINE C. TAKAHASHI	Date of Receipt MM / DD / YYYY 10 / 29 / 2010
	Mailing Address 1704 BRIDGE ST	Transaction ID: SA11.13961419
	City State Zip Code LOS ANGELES CA 90033-1625	Amount of Each Receipt this Period 680.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) MR. FRANCIS X. TALBOT	Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address 6100 WESTCHESTER PARK DR APT 811	Transaction ID: SA11.13961078
	City State Zip Code COLLEGE PARK MD 20740-2847	Amount of Each Receipt this Period 85.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation AMERICAN NUCLERE ENGINEER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00	

C.	Full Name (Last, First, Middle Initial) MR. JOHN C. TALBOTT	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 1435 N 8TH. ST.	Transaction ID: SA11.13954575
	City State Zip Code PEKIN IL 61554-2102	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

SUBTOTAL of Receipts This Page (optional)	865.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2205 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. BRYAN I. TANAKA		Date of Receipt
	Mailing Address 336 EGGERKING ROAD		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	KAPAA	HI	96746-1315
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13956608
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="200.00"/>
		<input type="text" value="300.00"/>	CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) STEVEN R. TANENBAUM		Date of Receipt
	Mailing Address 229 GLENMOOR RD		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	GLADWYNE	PA	19035-1501
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13940702
Name of Employer A WISH COME TRUE		Occupation MANUFACTURING	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="480.00"/>
		<input type="text" value="1220.00"/>	CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) KATHY TANNER		Date of Receipt
	Mailing Address 2812 E ELKHORN LN		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	SANDY	UT	84093-6593
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13952871
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="200.00"/>
		<input type="text" value="500.00"/>	CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="880.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2206 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. IMARIE TANSEY

Mailing Address 24 CAMPUS CT.

City AVON LAKE State OH Zip Code 44012-3307

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt: 11 / 22 / 2010
Transaction ID: SA11.13971606
 Amount of Each Receipt this Period: 60.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. J WARREN TAPSCOTT

Mailing Address 10850 W WEDGEWOOD DR.

City SUN CITY State AZ Zip Code 85351-1036

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13941731
 Amount of Each Receipt this Period: 101.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. JOAQUIN C. TARANCO

Mailing Address 7201 SW 5TH ST.

City PLANTATION State FL Zip Code 33317-3812

FEC ID number of contributing federal political committee. **C**

Name of Employer SHERIDAN HEALTHCARE Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 222.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13933054
 Amount of Each Receipt this Period: 26.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **187.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2207 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DR. JOAQUIN C. TARANCO		Date of Receipt
	Mailing Address 7201 SW 5TH ST.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 7 / 2 0 1 0
	City	State	Zip Code
	PLANTATION	FL	33317-3812
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13958575
		Amount of Each Receipt this Period	
		<input type="text"/> 40.00	
Name of Employer SHERIDAN HEALTHCARE		Occupation PHYSICIAN	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 222.00	

B.	Full Name (Last, First, Middle Initial) MRS. ALICE A. TASSELL		Date of Receipt
	Mailing Address 259 W ROCK CREEK RD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 2 / 2 0 1 0
	City	State	Zip Code
	NEW BERN	NC	28562-3624
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13950618
		Amount of Each Receipt this Period	
		<input type="text"/> 50.00	
Name of Employer RETIRED		Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 230.00	

C.	Full Name (Last, First, Middle Initial) MRS. ALICE A. TASSELL		Date of Receipt
	Mailing Address 259 W ROCK CREEK RD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 0 1 / 2 0 1 0
	City	State	Zip Code
	NEW BERN	NC	28562-3624
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13963732
		Amount of Each Receipt this Period	
		<input type="text"/> 95.00	
Name of Employer RETIRED		Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 230.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 185.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2208 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. WALTER A. TATE

Mailing Address 9225 TALBERT AVE

City State Zip Code
FOUNTAIN VLY CA 92708-4440

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 451.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937380

Amount of Each Receipt this Period

40.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. RICHARD O. TATHAM

Mailing Address 18828 MUNN RD.

City State Zip Code
CHAGRIN FALLS OH 44023-6261

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CLEVELAND BLACK OXIDE BUSINESS OWNER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 251.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933032

Amount of Each Receipt this Period

76.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
ALFRED J. TATMAN

Mailing Address 6475 MISSION RDG.

City State Zip Code
TRAVERSE CITY MI 49686-1800

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 301.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958434

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

216.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2209 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GEORGE M. TATOM

Mailing Address 600 OWENS ST

City DOTHAN State AL Zip Code 36301-5044

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13954838
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. VALENTINE J. TAUBNER, JR.

Mailing Address 45 HEYWOOD RD

City PELHAM State NY Zip Code 10803-2503

FEC ID number of contributing federal political committee. **C**

Name of Employer BCM CORP Occupation ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1051.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13945695
Amount of Each Receipt this Period: 250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PHILLIP R. TAVES, SR.

Mailing Address 3192 ROGERS DR

City CAMBRIA State CA Zip Code 93428-3928

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13934419
Amount of Each Receipt this Period: 60.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 360.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2210 / 3187
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ANDREW C. TAYLOR

Mailing Address 1147 LOG CABIN LANE

City State Zip Code
ST. LOUIS MO 63124-1519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ENTERPRISE LEASING COMPANY INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961233

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. BARBARA B. TAYLOR

Mailing Address 1147 LOG CABIN LANE

City State Zip Code
SAINT LOUIS MO 63124-1519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 12500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13966025

Amount of Each Receipt this Period
7500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. BETTY H. TAYLOR

Mailing Address 1416 WADE DR

City State Zip Code
BEDFORD TX 76022-6612

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953550

Amount of Each Receipt this Period
51.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 12551.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2211 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
EDWARD J. TAYLOR

Mailing Address 6715 35TH. AVE N

City State Zip Code
ST PETERSBURG FL 33710-1520

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956698

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ERVIN E. TAYLOR, JR.

Mailing Address 36436 HWY 72

City State Zip Code
SALEM MO 65560-8837

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 369.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930520

Amount of Each Receipt this Period

40.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ERVIN E. TAYLOR, JR.

Mailing Address 36436 HWY 72

City State Zip Code
SALEM MO 65560-8837

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 369.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943136

Amount of Each Receipt this Period

30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

95.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2212 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. G E. TAYLOR

Mailing Address P.O. BOX 575

City State Zip Code
BRIDGEPORT TX 76426-0575

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955057

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. GEORGE R. TAYLOR

Mailing Address 7321 ABERDEEN PKWY E

City State Zip Code
TULSA OK 74132-2125

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
455.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954211

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. GERALD WAYNE TAYLOR

Mailing Address P. O. BOX1227

City State Zip Code
PASCAGOULA MS 39568-1227

FEC ID number of contributing federal political committee. **C**

Name of Employer TECHWELD INC.
Occupation OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918720

Amount of Each Receipt this Period
115.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **365.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2213 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. GLEN L. TAYLOR

Mailing Address 732 HILLCREST ST.

City State Zip Code
DENTON TX 76201-2405

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 402.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941470

Amount of Each Receipt this Period
21.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. GLEN L. TAYLOR

Mailing Address 732 HILLCREST ST.

City State Zip Code
DENTON TX 76201-2405

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 402.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13972729

Amount of Each Receipt this Period
21.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JACK C. TAYLOR

Mailing Address 35 HUNTER AVENUE

City State Zip Code
SAINT LOUIS MO 63124-2008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ENTERPRISE RENT A. CAR EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 7500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13966027

Amount of Each Receipt this Period
7500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **7542.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2214 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. JEAN M. TAYLOR

Mailing Address 535 HARVARD STREET

City State Zip Code
WHITMAN MA 02382-2321

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 237.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935386

Amount of Each Receipt this Period

15.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JOHN W. TAYLOR

Mailing Address 245 MISSION RD.

City State Zip Code
SEDONA AZ 86336-4637

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940683

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. KENNETH E. TAYLOR

Mailing Address 19510 ARGYLE OVAL

City State Zip Code
ROCKY RIVER OH 44116-1604

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
OHIO CAT BUSINESS EXECUTIVE

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 2500.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13965479

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2715.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2215 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
LEAH C. TAYLOR

Mailing Address 11 WOODSTONE ST.

City State Zip Code
HOUSTON TX 77024-6228

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935479

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
LEAH C. TAYLOR

Mailing Address 11 WOODSTONE ST.

City State Zip Code
HOUSTON TX 77024-6228

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946377

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. MARILYN TAYLOR

Mailing Address 804 TOBACCOPORT ROAD

City State Zip Code
BUMPUS MILLS TN 37028-6145

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1125.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949793

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

300.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2216 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MELVIN L. TAYLOR		Date of Receipt
	Mailing Address 3210 ROSE AVE		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	CERES	CA	95307-3811
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13952348
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Amount of Each Receipt this Period	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="20.00"/>	
Occupation INFORMATION REQUESTED PER BEST EFFORTS		CONTRIBUTION	
Aggregate Year-to-Date ▼		<input type="text" value="212.00"/>	

B.	Full Name (Last, First, Middle Initial) MELVIN L. TAYLOR		Date of Receipt
	Mailing Address 3210 ROSE AVE		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	CERES	CA	95307-3811
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13952617
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Amount of Each Receipt this Period	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="30.00"/>	
Occupation INFORMATION REQUESTED PER BEST EFFORTS		CONTRIBUTION	
Aggregate Year-to-Date ▼		<input type="text" value="212.00"/>	

C.	Full Name (Last, First, Middle Initial) MELVIN L. TAYLOR		Date of Receipt
	Mailing Address 3210 ROSE AVE		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	CERES	CA	95307-3811
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13952802
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Amount of Each Receipt this Period	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="30.00"/>	
Occupation INFORMATION REQUESTED PER BEST EFFORTS		CONTRIBUTION	
Aggregate Year-to-Date ▼		<input type="text" value="212.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="80.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2217 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MELVIN L. TAYLOR

Mailing Address 3210 ROSE AVE

City CERES State CA Zip Code 95307-3811

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 212.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953049

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. NORMAN V. TAYLOR

Mailing Address 924 LAUDERDALE DR.

City LEXINGTON State KY Zip Code 40515-6466

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 716.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950440

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. PHYLLIS TAYLOR

Mailing Address 1 LEE CIRCLE

City NEW ORLEANS State LA Zip Code 70130-3931

FEC ID number of contributing federal political committee. **C**

Name of Employer TAYLOR ENERGY CO.
Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13959342

Amount of Each Receipt this Period
15000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 15090.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2218 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ROBERT W. TAYLOR

Mailing Address **1010 FOSTER ST.**

City **RAYVILLE** State **LA** Zip Code **71269-3215**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt **10 / 26 / 2010**

Transaction ID: SA11.13956283

Amount of Each Receipt this Period **90.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. THADDEUS M. TAYLOR

Mailing Address **2704 S GROVE ST**

City **ARLINGTON** State **VA** Zip Code **22202-2424**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **701.00**

Date of Receipt **10 / 22 / 2010**

Transaction ID: SA11.13949253

Amount of Each Receipt this Period **60.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. THOMAS TAYLOR

Mailing Address **108 MONROE DRIVE**

City **HORSEHEADS** State **NY** Zip Code **14845-2269**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PRFL** Occupation **PHYSICIAN**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt **10 / 15 / 2010**

Transaction ID: SA11.13928538

Amount of Each Receipt this Period **250.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **400.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2219 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
TROY TAYLOR

Mailing Address 5120 LAFITTE DR

City State Zip Code
OAK PARK CA 91377-4722

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 485.00

Date of Receipt: 11 / 03 / 2010
Transaction ID: SA11.13965348
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM E. TAYLOR

Mailing Address 2135 MARTIN AVE

City State Zip Code
FREMONT OH 43420-3164

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13934642
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM E. TAYLOR

Mailing Address 2135 MARTIN AVE

City State Zip Code
FREMONT OH 43420-3164

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13936282
Amount of Each Receipt this Period: 1.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 76.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2220 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) B. TEBAULT	Date of Receipt
	Mailing Address 166 SAN MARCO AVE	<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City State Zip Code SAINT AUGUSTINE FL 32084-2732	Transaction ID: SA11.13955916
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="210.00"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="470.00"/>	

B.	Full Name (Last, First, Middle Initial) MR. NORMAN R. TEETERS	Date of Receipt
	Mailing Address P.O. BOX 202	<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>
	City State Zip Code COLDWATER MI 49036-0202	Transaction ID: SA11.13943121
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="40.00"/>
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="400.00"/>	

C.	Full Name (Last, First, Middle Initial) MR. NORMAN R. TEETERS	Date of Receipt
	Mailing Address P.O. BOX 202	<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City State Zip Code COLDWATER MI 49036-0202	Transaction ID: SA11.13953886
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="40.00"/>
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="400.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="290.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2221 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROGER M. TEGANTVOORT

Mailing Address 111 MELISSA LANE

City State Zip Code
NEW MARKET AL 35761-9034

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931786

Amount of Each Receipt this Period
75.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CLIFTON E. TEMPLE

Mailing Address 8 SYLVAN AVE.

City State Zip Code
CHELMSFORD MA 01824-2328

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948735

Amount of Each Receipt this Period
60.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CLIFTON E. TEMPLE

Mailing Address 8 SYLVAN AVE.

City State Zip Code
CHELMSFORD MA 01824-2328

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949099

Amount of Each Receipt this Period
60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **195.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2222 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
CLIFTON E. TEMPLE

Mailing Address 8 SYLVAN AVE.

City State Zip Code
CHELMSFORD MA 01824-2328

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 340.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950016

Amount of Each Receipt this Period
60.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
CLIFTON E. TEMPLE

Mailing Address 8 SYLVAN AVE.

City State Zip Code
CHELMSFORD MA 01824-2328

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 340.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 7 / 2 0 1 0

Transaction ID: SA11.13969879

Amount of Each Receipt this Period
60.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. G. ERNEST TEMPLE

Mailing Address P.O. BOX 5

City State Zip Code
TWIN MOUNTAIN NH 03595-0005

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 900.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952340

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

320.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2223 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. S SCOTT TENNEY	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 15 RED FOX DR	Transaction ID: SA11.13953074
	City State Zip Code SHERIDAN WY 82801-8637	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation PHYSICIAN FEDERAL GOVERNMENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) MR. DAVID P. TENNY	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 3639 PAOLI COURT	Transaction ID: SA11.13959343
	City State Zip Code CHANTILLY VA 20151-3341	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) MS. MARGARET S. TERRELL	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 403 BEECHWOOD DR	Transaction ID: SA11.13951305
	City State Zip Code TYLER TX 75701-7847	Amount of Each Receipt this Period 155.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

SUBTOTAL of Receipts This Page (optional)	▶	1205.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2224 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. ROBIN TERRELL

Mailing Address P.O. BOX 624

City State Zip Code
HAMILTON TX 76531-0624

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1110.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13942578

Amount of Each Receipt this Period
275.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. LOUIE P. TERSINI

Mailing Address 743 BICKNELL RD

City State Zip Code
LOS GATOS CA 95030-2149

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
11 / 05 / 2010

Transaction ID: SA11.13966499

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. REX K. TETER

Mailing Address 411 YORKSHIRE AVE

City State Zip Code
PASADENA TX 77503-1428

FEC ID number of contributing federal political committee. **C**

Name of Employer FAIRMONT ELEMENTARY SCHOOL
Occupation TEACHER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13946855

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **725.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2225 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. REX K. TETER

Mailing Address 411 YORKSHIRE AVE

City State Zip Code
PASADENA TX 77503-1428

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FAIRMONT ELEMENTARY SCHOOL TEACHER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13947010

Amount of Each Receipt this Period

1.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. DUANE G. TEUSCHER

Mailing Address 22 SHEARWATER PL

City State Zip Code
SPRING TX 77381-5124

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 341.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932572

Amount of Each Receipt this Period

1.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. DUANE G. TEUSCHER

Mailing Address 22 SHEARWATER PL

City State Zip Code
SPRING TX 77381-5124

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 341.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933445

Amount of Each Receipt this Period

80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

82.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2226 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. DUANE G. TEUSCHER		Date of Receipt
	Mailing Address 22 SHEARWATER PL		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	SPRING	TX	77381-5124
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer RETIRED		Occupation RETIRED	Transaction ID: SA11.13954425
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="341.00"/>	<input type="text" value="80.00"/>
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) MS. LINDA M. TEWS		Date of Receipt
	Mailing Address 1758 BAFFORD LN		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	FALLON	NV	89406-7417
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13951310
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="310.00"/>	<input type="text" value="50.00"/>
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) MRS. HILLARY THAMER		Date of Receipt
	Mailing Address 420 VISTA PARADA		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	NEWPORT BEACH	CA	92660-3544
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13952448
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="530.00"/>	<input type="text" value="75.00"/>
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="205.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2227 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GEORGE C. THIBODEAUX
 Mailing Address 1720 N PINE ST
 City State Zip Code
 DERIDDER LA 70634-2143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SOUTHERN APPRAISALS INC. OWNER
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 270.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 0 / 2 0 1 0
Transaction ID: SA11.13938506
 Amount of Each Receipt this Period
 160.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. EDWARD E. THIELE
 Mailing Address 1704 LAGUNA DR
 City State Zip Code
 RICHMOND TX 77406-9738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1802.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 9 / 2 0 1 0
Transaction ID: SA11.13941409
 Amount of Each Receipt this Period
 300.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. EDWARD E. THIELE
 Mailing Address 1704 LAGUNA DR
 City State Zip Code
 RICHMOND TX 77406-9738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1802.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 9 / 2 0 1 0
Transaction ID: SA11.13941427
 Amount of Each Receipt this Period
 1.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 461.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2228 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. PETER THIEL	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address ONE LETTERMAN DRIVE BUILDING C-SUITE 400	Transaction ID: SA11.13951145
	City State Zip Code SAN FRANCISCO CA 94129-1494	Amount of Each Receipt this Period 15000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation CLARIUM CAPTIAL MANAGEMENT LLC PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00	

B.	Full Name (Last, First, Middle Initial) STEVEN THIEL	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 85 5TH AVE S	Transaction ID: SA11.13942086
	City State Zip Code WAHPETON ND 58075-4744	Amount of Each Receipt this Period 55.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00	

C.	Full Name (Last, First, Middle Initial) MR. TOM THIEMAN	Date of Receipt MM / DD / YYYY 10 / 29 / 2010
	Mailing Address 100 GILBERG ST	Transaction ID: SA11.13959069
	City State Zip Code NEW BREMEN OH 45869-1286	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional)	▶	15455.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2229 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOEL V. THIESSEN

Mailing Address 1292 N. 21ST AVENUE

City State Zip Code
RAYMOND IL 62560-5069

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ROY WHITE KAMP, INC. HERDSMAN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 235.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13947463

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. JOAN THIXTON

Mailing Address 9523 E 33RD. ST. S

City State Zip Code
INDEPENDENCE MO 64052-1006

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 212.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13964579

Amount of Each Receipt this Period
39.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. BRENDA THOMAS

Mailing Address 346 ROBIN LN.

City State Zip Code
GATLINBURG TN 37738-5844

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DR DAVID CAMPBELL DENTAL

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 265.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13947904

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 119.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2230 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. BRIAN THOMAS

Mailing Address 3722 N AMBLEWOOD CIR

City LIMA State OH Zip Code 45806-1325

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13950824
Amount of Each Receipt this Period: 70.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CARL THOMA

Mailing Address 180 E. PEARSON ST.
UNIT 6105

City CHICAGO State IL Zip Code 60611-2190

FEC ID number of contributing federal political committee. **C**

Name of Employer THOMA BRAVO
Occupation MANAGING DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 7950.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13951153
Amount of Each Receipt this Period: 7950.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DANNY THOMAS

Mailing Address 49 IVIERS DR

City LITTLE ROCK State AR Zip Code 72223-9143

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED
Occupation REAL ESTATE BROKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 760.00

Date of Receipt: 10 / 28 / 2010
Transaction ID: SA11.13957660
Amount of Each Receipt this Period: 210.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 8230.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2231 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DOUGLAS D. THOMAS

Mailing Address 3330 10TH LN W

City PALMETTO State FL Zip Code 34221-2525

FEC ID number of contributing federal political committee. **C**

Name of Employer GOODYEAR Occupation SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt 11 / 02 / 2010
Transaction ID: SA11.13962621
Amount of Each Receipt this Period 200.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GERALD D. THOMAS

Mailing Address 210 MAGNOLIA RIDGE

City JONESBOROUGH State TN Zip Code 37659-4791

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation CONTRACTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 03 / 2010
Transaction ID: SA11.13966033
Amount of Each Receipt this Period 1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HUGHES C. THOMAS

Mailing Address PO BOX 610

City SINTON State TX Zip Code 78387-0610

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt 11 / 04 / 2010
Transaction ID: SA11.13965162
Amount of Each Receipt this Period 35.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1235.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2232 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOHNNY D. THOMAS

Mailing Address 11926 LUCASVILLE RD

City State Zip Code
MANASSAS VA 20112-4415

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13931341

Amount of Each Receipt this Period
75.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. JOYCE M. THOMAS

Mailing Address P.O. BOX 143

City State Zip Code
STOCKTON AL 36579-0143

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13942261

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MORTIMER H. THOMAS

Mailing Address 5040 16TH AVE. N. E.

City State Zip Code
SEATTLE WA 98105-4229

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
560.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13969243

Amount of Each Receipt this Period
70.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **195.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2233 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
RICHARD THOMAS

Mailing Address 217 ALTA PLAZA

City State Zip Code
CORPUS CHRISTI TX 78411-1413

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED GEOPHYSICAL CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13971268

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RICHARD B. THOMAS

Mailing Address 46 EMS T30 LN.

City State Zip Code
LEESBURG IN 46538-9128

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 445.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948877

Amount of Each Receipt this Period
70.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RICHARD B. THOMAS

Mailing Address 46 EMS T30 LN.

City State Zip Code
LEESBURG IN 46538-9128

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 445.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13969238

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **370.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2234 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. ROBERT E. THOMAS

Mailing Address P.O. BOX 4679

City State Zip Code
TULSA OK 74159-0679

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1751.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13948190

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT W. THOMAS

Mailing Address 494 W 10TH AVE APT 313

City State Zip Code
EUGENE OR 97401-8345

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 555.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931785

Amount of Each Receipt this Period

85.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. SARA THOMAS

Mailing Address 186 ASCOT PARK COMMON DR.

City State Zip Code
MEMPHIS TN 38120-2355

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 261.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939036

Amount of Each Receipt this Period

26.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

611.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2235 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. SHAWN R. THOMAS		Date of Receipt
	Mailing Address 882 MANOR LANE		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	BAY SHORE	NY	11706-7513
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13957666
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	<input type="text" value="50.00"/>
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MR. SUSAN L. THOMAS		Date of Receipt
	Mailing Address 71870 563RD AVE		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	FAIRBURY	NE	68352-4001
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13955730
Name of Employer REJECTED		Occupation COUNCILER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="225.00"/>	<input type="text" value="50.00"/>
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) WILLIAM H. THOMAS		Date of Receipt
	Mailing Address P.O. BOX 1297		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	GULF BREEZE	FL	32562-1297
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13932996
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="201.00"/>	<input type="text" value="101.00"/>
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="201.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2236 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. BETTY A. THOMPSON

Mailing Address 47 GREENCROFT DR

City State Zip Code
CHAMPAIGN IL 61821-5115

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
246.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933177

Amount of Each Receipt this Period
36.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. BETTY A. THOMPSON

Mailing Address 47 GREENCROFT DR

City State Zip Code
CHAMPAIGN IL 61821-5115

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
246.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948879

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DEBORAH B. THOMPSON

Mailing Address 208 TCHEFUNETE PARK CT

City State Zip Code
MADISONVILLE LA 70447-9777

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
403.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953616

Amount of Each Receipt this Period
51.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **137.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2237 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DEBORAH B. THOMPSON	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 208 TCHEFUNETE PARK CT	Transaction ID: SA11.13953750
	City State Zip Code MADISONVILLE LA 70447-9777	Amount of Each Receipt this Period 2.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer PONTCHARTRAIN PHARMACY	Occupation PHARMACIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 403.00	

B.	Full Name (Last, First, Middle Initial) GEORGE F. THOMPSON	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 659 ROXTON LN SW	Transaction ID: SA11.13934649
	City State Zip Code MARIETTA GA 30064-2997	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) MR. GREGORY THOMPSON	Date of Receipt MM / DD / YYYY 11 / 02 / 2010
	Mailing Address 2931 TRUE RD.	Transaction ID: SA11.13962523
	City State Zip Code YUBA CITY CA 95993-9696	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00	

SUBTOTAL of Receipts This Page (optional)	▶	302.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2238 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. JAMES A. THOMPSON		Date of Receipt
	Mailing Address 1136 MAYLAND LANE		<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	BIRMINGHAM	AL	35216-2228
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13943867
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="251.00"/>	<input type="text" value="101.00"/>
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) JANE THOMPSON		Date of Receipt
	Mailing Address 156 MIRA VELERO		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	SAN CLEMENTE	CA	92673-3115
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13952031
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="371.00"/>	<input type="text" value="25.00"/>
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) JANE THOMPSON		Date of Receipt
	Mailing Address 156 MIRA VELERO		<input type="text" value="11"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	SAN CLEMENTE	CA	92673-3115
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13972751
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="371.00"/>	<input type="text" value="50.00"/>
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="176.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2239 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JOSEPH THOMPSON

Mailing Address 6115 ABERDEEN AVENUE

City State Zip Code
DALLAS TX 75230-5003

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MISTER SWEEPER BUSINESS OWNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959417

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. MARK A. THOMPSON

Mailing Address 690 OSCEOLA COURT NE

City State Zip Code
ST PETERSBURG FL 33702-2753

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
THOMPSON GLOBAL PARTNERS, LLC GENERAL MANAGER/ENGINEER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 310.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13957646

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. NIKOLEE THOMPSON

Mailing Address 2630 GREY OAKS DR N APT 20

City State Zip Code
NAPLES FL 34105-3003

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950498

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2240 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. ROBBIE THOMPSON	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address PO BOX 309	Transaction ID: SA11.13955890
	City State Zip Code CARLOTTA CA 95528-0309	Amount of Each Receipt this Period 110.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00

B.	Full Name (Last, First, Middle Initial) MR. STACEY THOMPSON	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 67 OAK GROVE DR	Transaction ID: SA11.13930903
	City State Zip Code NOVATO CA 94949-7220	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SAMERFELL CITY SCHOOL		Occupation HIGH SCHOOL COUNSOLOR
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00

C.	Full Name (Last, First, Middle Initial) MR. STACEY THOMPSON	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 67 OAK GROVE DR	Transaction ID: SA11.13942865
	City State Zip Code NOVATO CA 94949-7220	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SAMERFELL CITY SCHOOL		Occupation HIGH SCHOOL COUNSOLOR
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00

SUBTOTAL of Receipts This Page (optional)	270.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2241 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
STEPHEN THOMPSON

Mailing Address P.O. BOX 828

City State Zip Code
WARRENSBURG MO 64093-0828

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HEATLAND FOR HUMANIDTY CONSTRUCTION DIRECTOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 650.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949179

Amount of Each Receipt this Period

40.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
STEPHEN THOMPSON

Mailing Address P.O. BOX 828

City State Zip Code
WARRENSBURG MO 64093-0828

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HEATLAND FOR HUMANIDTY CONSTRUCTION DIRECTOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 650.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 4 / 2 0 1 0

Transaction ID: SA11.13965620

Amount of Each Receipt this Period

40.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. SYLCIA F. THOMPSON

Mailing Address 26 THAYER AVENUE

City State Zip Code
WEYMOUTH MA 02188-1516

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 278.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 1 0

Transaction ID: SA11.13967252

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

105.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2242 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
THERESA THOMPSON

Mailing Address 4101 N. RANDOLPH COURT

City ARLINGTON State VA Zip Code 22207-4863

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 01 / 2010

Transaction ID: SA11.13961124

Amount of Each Receipt this Period 500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. NANCY J. THORNER

Mailing Address 331 E. BLODGETT AVENUE

City LAKE BLUFF State IL Zip Code 60044-2112

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 386.00

Date of Receipt 10 / 18 / 2010

Transaction ID: SA11.13932690

Amount of Each Receipt this Period 26.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. TERRY R. THORN

Mailing Address 11920 158TH AVE. N. E.

City REDMOND State WA Zip Code 98052-2633

FEC ID number of contributing federal political committee. **C**

Name of Employer VISION MARKETING Occupation FOOD BROKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 10 / 25 / 2010

Transaction ID: SA11.13952918

Amount of Each Receipt this Period 200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 726.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2243 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. CATHERINE I. THREET	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 14 EDINBURGH CIR. UNIT 9D	Transaction ID: SA11.13948296
	City State Zip Code PAGOSA SPGS CO 81147-8916	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation HOMEMAKER HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

B.	Full Name (Last, First, Middle Initial) SUSAN THROWER	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 8225 FORT HUNT RD.	Transaction ID: SA11.13930203
	City State Zip Code ALEXANDRIA VA 22308-1734	Amount of Each Receipt this Period 51.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation DEPOWL UNIVERSITY COLLEGE OF LAW PROFESSOR OF LAW	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	

C.	Full Name (Last, First, Middle Initial) SUSAN THROWER	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 8225 FORT HUNT RD.	Transaction ID: SA11.13952688
	City State Zip Code ALEXANDRIA VA 22308-1734	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation DEPOWL UNIVERSITY COLLEGE OF LAW PROFESSOR OF LAW	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	

SUBTOTAL of Receipts This Page (optional)	201.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2244 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES D. THUESEN

Mailing Address 633 GULFWOOD RD.

City State Zip Code
KNOXVILLE TN 37923-2213

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13932711

Amount of Each Receipt this Period
300.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JIM THURMAN

Mailing Address 5936 BROADWAY AVE

City State Zip Code
GREAT BEND KS 67530-3177

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
11 / 03 / 2010

Transaction ID: SA11.13965293

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. FRED THURSTON

Mailing Address 5801 N OAKWOOD RD
APT E308

City State Zip Code
ENID OK 73703-9303

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13931821

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 500.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2245 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. TODD TIDGEWELL		Date of Receipt
	Mailing Address 401 9TH STREET, NW SUITE 900		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 11 / 10 / 2010
	City	State	Zip Code
	WASHINGTON	DC	20004-2145
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13968691
Name of Employer NIXON & PEABODY		Occupation ATTORNEY	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00	<input type="text"/> 650.00
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) SANDRA TIDWELL		Date of Receipt
	Mailing Address P.O. BOX 1217		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 11 / 03 / 2010
	City	State	Zip Code
	MINEOLA	TX	75773-7217
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13965301
Name of Employer HOMEMAKER		Occupation HOMEMAKER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 580.00	<input type="text"/> 50.00
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) CORWYN B. TIEDE		Date of Receipt
	Mailing Address 60 JENNIFER CIR.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 10 / 22 / 2010
	City	State	Zip Code
	ROGERSVILLE	AL	35652-7212
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13950267
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	<input type="text"/> 150.00
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 850.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2246 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. PAUL L. TIEFRY

Mailing Address 249 CLEARWATER DRIVE

City State Zip Code
RIDGEDALE MO 65739-4290

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938714

Amount of Each Receipt this Period
90.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. STEVEN TIGHE

Mailing Address 25 SYCAMORE ST.

City State Zip Code
BRONXVILLE NY 10708-1810

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BANK OF AMERICA MERRILL LYNCH NATIONAL SALES DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13951064

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WARREN TIGNER

Mailing Address 2203 MILLER RD

City State Zip Code
ROSHARON TX 77583-4533

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 897.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949226

Amount of Each Receipt this Period
80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **5170.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2247 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. WARREN TIGNER

Mailing Address 2203 MILLER RD

City State Zip Code
ROSHARON TX 77583-4533

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 897.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Transaction ID: SA11.13968082

Amount of Each Receipt this Period

60.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. WALTER F. TILDEN

Mailing Address 9104 PRESTONDALE AVE
44

City State Zip Code
HENRICO VA 23294

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937191

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. FRANK ANDREW TILLOTSON

Mailing Address 15112 HAWKSBILL COURT

City State Zip Code
WOODBIDGE VA 22193-5831

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BROWN RUDNICK ATTORNEY

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 5 / 2 0 1 0

Transaction ID: SA11.13968039

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2610.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2248 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. PHYLLIS O. TILSON

Mailing Address 3868 EXMOOR CIR

City State Zip Code
SACRAMENTO CA 95864-5905

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 296.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928056

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. PHYLLIS O. TILSON

Mailing Address 3868 EXMOOR CIR

City State Zip Code
SACRAMENTO CA 95864-5905

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 296.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956885

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. PHYLLIS O. TILSON

Mailing Address 3868 EXMOOR CIR

City State Zip Code
SACRAMENTO CA 95864-5905

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 296.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961326

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 75.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2249 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ERNST G. TIMM

Mailing Address 1118 BERNARDO BLVD

City State Zip Code
LADY LAKE FL 32159-5798

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 395.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13960766

Amount of Each Receipt this Period
110.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM C. TIMMERMEISTER

Mailing Address P.O. BOX 1649

City State Zip Code
LIMA OH 45802-1649

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LIMA AUTO MALL CAR DEALER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 364.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13952935

Amount of Each Receipt this Period
150.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. SADIE PEARL TIMMONS

Mailing Address 3817 BOOTH ST.

City State Zip Code
KANSAS CITY KS 66103-2803

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2010

Transaction ID: SA11.13956460

Amount of Each Receipt this Period
60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 320.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2250 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. WILLIAM E. TIMMONS, JR.

Mailing Address 1110 VERMONT AVE. NW

City State Zip Code
WASHINGTON DC 20005-3544

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PRIME POLICY GROUP CONSULTANT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959388

Amount of Each Receipt this Period
150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. DONALD R. TINDALL

Mailing Address 3700 VIOLA LN.

City State Zip Code
MURPHYSBORO IL 62966-6510

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933200

Amount of Each Receipt this Period
101.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. JESSIE G. TINLING

Mailing Address 1325 CUBA AVE

City State Zip Code
ALAMOGORDO NM 88310-5727

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 485.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13961129

Amount of Each Receipt this Period
39.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

290.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2251 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. JESSIE G. TINLING	Date of Receipt MM / DD / YYYY 11 / 09 / 2010
	Mailing Address 1325 CUBA AVE	Transaction ID: SA11.13966520
	City State Zip Code ALAMOGORDO NM 88310-5727	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 485.00	

B.	Full Name (Last, First, Middle Initial) MR. GARY D. TINSLEY	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 1036 COUNTY ROAD 105	Transaction ID: SA11.13945375
	City State Zip Code NACOGDOCHES TX 75965-8174	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

C.	Full Name (Last, First, Middle Initial) MR. JAMES E. TIPS	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 211 E IRELAND ST	Transaction ID: SA11.13939048
	City State Zip Code SEGUIN TX 78155-4915	Amount of Each Receipt this Period 21.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation UNEMPLOYED UNEMPLOYED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 206.00	

SUBTOTAL of Receipts This Page (optional)	171.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2252 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. LOIS E. TITUS

Mailing Address 33 N LINDEN DR.

City State Zip Code
VENTURA CA 93004-1236

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945346

Amount of Each Receipt this Period
150.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. SAMUEL C. TOBIAS

Mailing Address P.O. BOX 68

City State Zip Code
BRIDGE CITY TX 77611-0068

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941358

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MURRAY A. TODD

Mailing Address 48537 VIA ENCANTO

City State Zip Code
LA QUINTA CA 92253-2260

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929012

Amount of Each Receipt this Period
35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 210.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2253 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. CARYL E. TOEDTER

Mailing Address 1000 N 15TH ST
T

City MARYSVILLE State KS Zip Code 66508-1123

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1141.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941582

Amount of Each Receipt this Period
181.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. CARYL E. TOEDTER

Mailing Address 1000 N 15TH ST
T

City MARYSVILLE State KS Zip Code 66508-1123

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1141.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961738

Amount of Each Receipt this Period
180.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. DAVID H. TOFSTED

Mailing Address P.O. BOX 123

City WHITE SANDS State NM Zip Code 88002-0123

FEC ID number of contributing federal political committee. **C**

Name of Employer U. S. ARMY
Occupation PHYSICIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950257

Amount of Each Receipt this Period
20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **381.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2254 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DAVID H. TOFSTED

Mailing Address P.O. BOX 123

City State Zip Code
WHITE SANDS NM 88002-0123

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
U. S. ARMY PHYSICIST

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2010

Transaction ID: SA11.13965178

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LLOYD E. TOLLEY

Mailing Address P.O. BOX 175

City State Zip Code
BUCHANAN VA 24066-0175

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 235.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2010

Transaction ID: SA11.13951338

Amount of Each Receipt this Period
85.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. BILLIE WAI TOM

Mailing Address 30 PLYMOUTH ST.

City State Zip Code
CENTEREACH NY 11720-4212

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 216.00

Date of Receipt
MM / DD / YYYY
11 / 08 / 2010

Transaction ID: SA11.13966763

Amount of Each Receipt this Period
12.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 197.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2255 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CHRISTOPHER TOMASZYCKI

Mailing Address 39580 DORIAN DRIVE

City State Zip Code
STERLING HEIGHTS MI 48310-2310

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CHRISTOPHER TOMASZYCKI, P.C. ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA11.13928070
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DELBERT E. TOMEY

Mailing Address 54 LOCUST ST

City State Zip Code
FISHERSVILLE VA 22939-2210

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 415.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13943409
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. DONNA TOMEY

Mailing Address 173 BERWICK WAY

City State Zip Code
SUNNYVALE CA 94087-3204

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 583.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13951460
Amount of Each Receipt this Period: 210.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 350.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2256 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM W. TOMLINSON

Mailing Address **6 LAKE HUNTER DR APT J8**

City **LAKELAND** State **FL** Zip Code **33803-6204**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **10 / 29 / 2010**

Transaction ID: SA11.13961531

Amount of Each Receipt this Period **50.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MICHAEL E. TONER

Mailing Address **4227 FORDHAM ROAD NW**

City **WASHINGTON** State **DC** Zip Code **20016-1907**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **10 / 26 / 2010**

Transaction ID: SA11.13957925

Amount of Each Receipt this Period **250.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. ROBERT ELTON TONSING

Mailing Address **4303 ST ANDREWS DR.**

City **PUEBLO** State **CO** Zip Code **81001-1164**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **PSYCHIATRIST**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **10 / 15 / 2010**

Transaction ID: SA11.13928006

Amount of Each Receipt this Period **250.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **550.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2257 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DAVID B. TOOTHMAN

Mailing Address 301 W MAIN STREET
SUITE 311

City ARDMORE State OK Zip Code 73401-6322

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2010

Transaction ID: SA11.13964787

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. BARBARA S. TOPKINS

Mailing Address 1753 SAN YSIDRO DR.

City BEVERLY HILLS State CA Zip Code 90210-2114

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED
Occupation INVESTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13935249

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. LOIS J. TORLUEMKE

Mailing Address 1339 S KRAMER CT

City AURORA State CO Zip Code 80012-4171

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt
MM / DD / YYYY
10 / 20 / 2010

Transaction ID: SA11.13944965

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **150.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2258 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
GEORGE J. TORRES

Mailing Address 13004 GLACIER SUMMIT DRIVE

City State Zip Code
DRAPER UT 84020-8811

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ATK PUBLIC RELATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 1 0

Transaction ID: SA11.13947689

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ANTHONY TORSIELLO

Mailing Address 2163 OAK TREE RD STE 101

City State Zip Code
EDISON NJ 08820-1083

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED DEVELOPER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13958325

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. G TOSTEVIN

Mailing Address 12555 37TH AVE NE

City State Zip Code
SEATTLE WA 98125-4654

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940828

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 790.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2259 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
WILLIAM S. TOTH

Mailing Address 7030 N AUSTIN AVE

City NILES State IL Zip Code 60714-4602

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 10 / 29 / 2010
Transaction ID: SA11.13959067
Amount of Each Receipt this Period: 1000.00
CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
LAWRENCE TOTSKY

Mailing Address N65W14482 REDWOOD DR.

City MENOMONEE FALLS State WI Zip Code 53051-5170

FEC ID number of contributing federal political committee. **C**

Name of Employer ARTISAN PARTNERS LIMITED PARTNERSHIP
Occupation CHIEF FINANCIAL OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13951442
Amount of Each Receipt this Period: 200.00
CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DR. JAMES S. TOUNG

Mailing Address 12118 INDIGO COVE LANE

City HOUSTON State TX Zip Code 77041-6194

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED
Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 10 / 27 / 2010
Transaction ID: SA11.1395971
Amount of Each Receipt this Period: 2500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 3700.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2260 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GORDON S. TOWNE

Mailing Address 625 ULULANI ST.

City State Zip Code
KAILUA HI 96734-4431

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941410

Amount of Each Receipt this Period
20.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GORDON S. TOWNE

Mailing Address 625 ULULANI ST.

City State Zip Code
KAILUA HI 96734-4431

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944657

Amount of Each Receipt this Period
20.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GORDON S. TOWNE

Mailing Address 625 ULULANI ST.

City State Zip Code
KAILUA HI 96734-4431

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952612

Amount of Each Receipt this Period
20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **60.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2261 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. GORDON S. TOWNE	Date of Receipt MM / DD / YYYY 11 / 19 / 2010
	Mailing Address 625 ULULANI ST.	Transaction ID: SA11.13972162
	City State Zip Code KAILUA HI 96734-4431	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		

B.	Full Name (Last, First, Middle Initial) MRS. NAOMI TOWNER	Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address PO BOX 2677	Transaction ID: SA11.13961083
	City State Zip Code OVERGAARD AZ 85933-2677	Amount of Each Receipt this Period 65.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		

C.	Full Name (Last, First, Middle Initial) DR. DAVID B. TOWNSEND	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 8819 RAYSON LN	Transaction ID: SA11.13928007
	City State Zip Code TINLEY PARK IL 60487-8433	Amount of Each Receipt this Period 750.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer UNIVERSITY OF CHICAGO Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00		

SUBTOTAL of Receipts This Page (optional)	835.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2262 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. JUDY K. TOWNSEND		Date of Receipt
	Mailing Address P.O. BOX 33		<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	DIXIE	WA	99329-0033
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer RETIRED		Occupation RETIRED	Transaction ID: SA11.13944177
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="240.00"/>	<input type="text" value="40.00"/>
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) MRS. JUDY K. TOWNSEND		Date of Receipt
	Mailing Address P.O. BOX 33		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	DIXIE	WA	99329-0033
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer RETIRED		Occupation RETIRED	Transaction ID: SA11.13961497
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="240.00"/>	<input type="text" value="40.00"/>
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) MR. MICHAEL TOWNSEND		Date of Receipt
	Mailing Address 99 WOODRANCH CIR.		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	DANVILLE	CA	94506-6117
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INTELLIGENT GLOBAL POOLING SYSTEM		Occupation DIRECTOR OF SALES	Transaction ID: SA11.13928015
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="310.00"/>	<input type="text" value="110.00"/>
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="190.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2263 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
HERMANN TRABOLD

Mailing Address 4705 JAMESTON ST

City State Zip Code
BOULDER CO 80301-4222

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935044

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
HERMANN TRABOLD

Mailing Address 4705 JAMESTON ST

City State Zip Code
BOULDER CO 80301-4222

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940657

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HERMANN TRABOLD

Mailing Address 4705 JAMESTON ST

City State Zip Code
BOULDER CO 80301-4222

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954391

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 120.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2264 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GARY TRAN

Mailing Address 3321 RED ROOF INN PL.

City State Zip Code
LOUISVILLE KY 40218-4570

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939280

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GARY D. TRAVERS

Mailing Address 14470 TRIADELPHIA MILL RD.

City State Zip Code
DAYTON MD 21036-1220

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953552

Amount of Each Receipt this Period
76.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DENNIS TRAVIS

Mailing Address 1 TRIMONT LN. APT. 2315A

City State Zip Code
PITTSBURGH PA 15211-1289

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
METLIFE FINANCIAL PLANNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1101.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13945763

Amount of Each Receipt this Period
300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **426.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2265 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. KENNETH H. TRAVIS

Mailing Address 4413 BRIARCLIFF DR.

City ALTON State IL Zip Code 62002-6914

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 801.00

Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13932997
 Amount of Each Receipt this Period 161.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. KENNETH H. TRAVIS

Mailing Address 4413 BRIARCLIFF DR.

City ALTON State IL Zip Code 62002-6914

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 801.00

Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13949732
 Amount of Each Receipt this Period 160.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. KENNETH H. TRAVIS

Mailing Address 4413 BRIARCLIFF DR.

City ALTON State IL Zip Code 62002-6914

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 801.00

Date of Receipt 11 / 16 / 2010
Transaction ID: SA11.13969280
 Amount of Each Receipt this Period 160.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 481.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2266 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. GELIA C. TRAWICK
Mailing Address 711 WOODLAND DR
City State Zip Code
FOLEY AL 36535-2907
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
TRAWICK BUILDERS BOOKKEEPER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00
Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13937230
Amount of Each Receipt this Period: 200.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LIONEL W. TREBILCOCK, III
Mailing Address 1300 KAREN OVAL
City State Zip Code
VIENNA OH 44473-9610
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
MILLWOOD INC. PRESIDENT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt: 10 / 28 / 2010
Transaction ID: SA11.13959444
Amount of Each Receipt this Period: 250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROGER M. TREMAYNE
Mailing Address RR 1 BOX 49A
City State Zip Code
WALTHILL NE 68067-5021
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
TREMAYNE'S FARM OWNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00
Date of Receipt: 11 / 16 / 2010
Transaction ID: SA11.13969320
Amount of Each Receipt this Period: 350.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 800.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2267 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. LORENZO TRIANA

Mailing Address 5151 SW 98TH AVENUE ROAD

City State Zip Code
MIAMI FL 33165-7256

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
L. TRIANA & ASSOC. INC. PROFESSIONAL ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948304

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MICHAEL TRIMARCO

Mailing Address 120 CRYSTAL BEACH BLVD

City State Zip Code
MORICHES NY 11955-1907

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13945197

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MICHAEL TRIMARCO

Mailing Address 120 CRYSTAL BEACH BLVD

City State Zip Code
MORICHES NY 11955-1907

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945651

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **375.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2268 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT L. TRIMPL

Mailing Address 16042 SYMPHONY BLVD.

City State Zip Code
NOBLESVILLE IN 46060-9299

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
MM / DD / YYYY
11 / 10 / 2010

Transaction ID: SA11.13967643

Amount of Each Receipt this Period
610.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT S. TROTH

Mailing Address P.O. BOX 286

City State Zip Code
HUNTSVILLE AL 35804-0286

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1020.00

Date of Receipt
MM / DD / YYYY
10 / 29 / 2010

Transaction ID: SA11.13961814

Amount of Each Receipt this Period
260.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. MAUREEN TROTTER

Mailing Address 1900 PINE STREET

City State Zip Code
ABILENE TX 79601-2432

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
10 / 29 / 2010

Transaction ID: SA11.13961810

Amount of Each Receipt this Period
300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **610.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2269 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. GERALD E. TROUTMAN

Mailing Address 2015 BUCKMAN AVE

City State Zip Code
READING PA 19610-1409

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TROUTMAN INDUSTRIES INC. PRESIDENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13957665

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
LYN LEE W. TROY

Mailing Address 41163 ALLA LILY ST

City State Zip Code
FORT MILL SC 29707-5853

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 295.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13965375

Amount of Each Receipt this Period

75.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
SEN. CAESAR TRUNZO

Mailing Address 105 WASHINGTON AVE

City State Zip Code
BRENTWOOD NY 11717-2723

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 539.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933150

Amount of Each Receipt this Period

76.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

261.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2270 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) SEN. CAESAR TRUNZO</p> <p>Mailing Address 105 WASHINGTON AVE</p> <p>City State Zip Code BRENTWOOD NY 11717-2723</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 539.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 18 / 2010</p> <p>Transaction ID: SA11.13935162</p> <p>Amount of Each Receipt this Period 3.00</p> <p>CONTRIBUTION</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) SEN. CAESAR TRUNZO</p> <p>Mailing Address 105 WASHINGTON AVE</p> <p>City State Zip Code BRENTWOOD NY 11717-2723</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 539.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 26 / 2010</p> <p>Transaction ID: SA11.13957165</p> <p>Amount of Each Receipt this Period 70.00</p> <p>CONTRIBUTION</p>
--	--

<p>C. Full Name (Last, First, Middle Initial) EDWIN TRUST</p> <p>Mailing Address 1964 SW SAINT ANDREWS DR.</p> <p>City State Zip Code PALM CITY FL 34990-2210</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 450.00</p>	<p>Date of Receipt MM / DD / YYYY 11 / 17 / 2010</p> <p>Transaction ID: SA11.13969858</p> <p>Amount of Each Receipt this Period 150.00</p> <p>CONTRIBUTION</p>
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SUBTOTAL of Receipts This Page (optional)	223.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2271 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. MARK TSAI

Mailing Address 16415 COLORADO AVENUE
#101

City State Zip Code
PARAMOUNT CA 90723-5051

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MARK TSAI, MD DOCTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955781

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. EDDIE TSARSI

Mailing Address 7 CRESCENT COVE DR.

City State Zip Code
SEAFORD NY 11783-3600

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 217.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932740

Amount of Each Receipt this Period
26.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. EDDIE TSARSI

Mailing Address 7 CRESCENT COVE DR.

City State Zip Code
SEAFORD NY 11783-3600

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 217.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936136

Amount of Each Receipt this Period
1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **227.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2272 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. EDDIE TSARSI

Mailing Address 7 CRESCENT COVE DR.

City State Zip Code
SEAFORD NY 11783-3600

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 217.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956777

Amount of Each Receipt this Period

30.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. JANE S. TSCHUDY

Mailing Address 9 COUNTRY ESTATES PL

City State Zip Code
SAINT LOUIS MO 63131-3411

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 415.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931930

Amount of Each Receipt this Period

210.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. MORDOKHAY I. TSIMRING

Mailing Address 2542 E 11TH STREET APT 1

City State Zip Code
BROOKLYN NY 11235-5012

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 340.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Transaction ID: SA11.13968170

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

290.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2273 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ABELLON DOMINADOR TUBOJAN	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 48 PROSPECT ST	Transaction ID: SA11.13933369
	City State Zip Code GREENWICH CT 06830-5228	Amount of Each Receipt this Period 101.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer BIMBO BAKERIES USA (ARNOLD BAKERY)	Occupation PACKAGING MACHINE OPERATOR (BAKER)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 551.00	

B.	Full Name (Last, First, Middle Initial) DR. JAMES TUCHEK	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 421 WESTMINSTER DRIVE	Transaction ID: SA11.13929741
	City State Zip Code BURR RIDGE IL 60527-8338	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer CARDIAC SURGERY ASSOCIATES	Occupation PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

C.	Full Name (Last, First, Middle Initial) MR. JAMES D. TUCK	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 153 BAKER RD	Transaction ID: SA11.13957679
	City State Zip Code MARTIN TN 38237-3819	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)	▶	401.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2274 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JEFFREY TUCKER

Mailing Address 100 CRESCENT COURT
STE. 450

City State Zip Code
DALLAS TX 75201-7822

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13948202

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JESSE F. TUCKER

Mailing Address 20450 HUEBNER RD APT 1007

City State Zip Code
SAN ANTONIO TX 78258-3905

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2010

Transaction ID: SA11.13965822

Amount of Each Receipt this Period
60.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN A. TUCKER

Mailing Address 119 CHURCH GATE LN

City State Zip Code
GAITHERSBURG MD 20878-7849

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13940944

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1160.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2275 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOHN L. TUCKER

Mailing Address **540 RIFORD RD**

City **NEENAH** State **WI** Zip Code **54956-4204**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **290.00**

Date of Receipt MM / DD / YYYY
10 / 20 / 2010

Transaction ID: SA11.13938475

Amount of Each Receipt this Period 50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. KEITH A. TUCKER

Mailing Address **3831 TURTLE CREEK BOULEVARD
APARTMENT 14A**

City **DALLAS** State **TX** Zip Code **75219-4414**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CENTURY BRIDGE** Occupation **MANAGING DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt MM / DD / YYYY
10 / 26 / 2010

Transaction ID: SA11.13957928

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ROBERT TUCKER

Mailing Address **5154 PINE LAKE RD**

City **WESLEY CHAPEL** State **FL** Zip Code **33543-4459**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt MM / DD / YYYY
10 / 14 / 2010

Transaction ID: SA11.13930897

Amount of Each Receipt this Period 300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 1350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2276 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM B. TUCKER

Mailing Address PO BOX 5617

City JACKSON State MS Zip Code 39288-5617

FEC ID number of contributing federal political committee. **C**

Name of Employer L. E. TUCKER & SON INC. Occupation LONG HAUL TRUCKING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt 10 / 18 / 2010

Transaction ID: SA11.13929067

Amount of Each Receipt this Period 175.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROY H. TUNBY

Mailing Address 512 S 15TH AVE

City BOZEMAN State MT Zip Code 59715-4140

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 22 / 2010

Transaction ID: SA11.13949272

Amount of Each Receipt this Period 200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM T. TURLINGTON

Mailing Address 607 SEAPORT BLVD

City CPE CANAVERAL State FL Zip Code 32920-5043

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 12 / 2010

Transaction ID: SA11.13968361

Amount of Each Receipt this Period 50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 425.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2277 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
CHARLES R. TURNEY

Mailing Address 1361 E BOOT RD. #265

City WEST CHESTER State PA Zip Code 19380-5988

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13939618
 Amount of Each Receipt this Period: 150.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. DONALD C. TURNER

Mailing Address 1615 BERGIN RD

City AURORA State NC Zip Code 27806-9314

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13932612
 Amount of Each Receipt this Period: 51.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES R. TURNER

Mailing Address 4461 WHISPER RUN DR

City COLLIERVILLE State TN Zip Code 38017-8543

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt: 10 / 29 / 2010
Transaction ID: SA11.13961720
 Amount of Each Receipt this Period: 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 251.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2278 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JIMMY B. TURNER

Mailing Address 1025 FM 2517

City State Zip Code
CARTHAGE TX 75633-4687

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 335.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13937219

Amount of Each Receipt this Period
20.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JIMMY B. TURNER

Mailing Address 1025 FM 2517

City State Zip Code
CARTHAGE TX 75633-4687

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 335.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2010

Transaction ID: SA11.13964637

Amount of Each Receipt this Period
20.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LARRY A. TURNER

Mailing Address 4091 E NICHOLAS DR.

City State Zip Code
CASS CITY MI 48726-9047

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13949085

Amount of Each Receipt this Period
20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **60.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2279 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. LOUISE M. TURNER	Date of Receipt MM / DD / YYYY 11 / 22 / 2010
	Mailing Address 15318 LINDITA DR.	Transaction ID: SA11.13971834
	City State Zip Code HOUSTON TX 77083-5049	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.00	

B.	Full Name (Last, First, Middle Initial) MS. NANCY S. TURNER	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address PO BOX 987	Transaction ID: SA11.13928051
	City State Zip Code VALLEY FORGE PA 19482-0987	Amount of Each Receipt this Period 610.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SELF-EMPLOYED PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1020.00	

C.	Full Name (Last, First, Middle Initial) MR. RICHARD TURNER	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 4729 OLD POST RD.	Transaction ID: SA11.13939296
	City State Zip Code EVANS GA 30809-5833	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SAIC INTELLIGENCE COMPUTER SYSTEMS ENG	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

SUBTOTAL of Receipts This Page (optional)	685.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2280 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. RICHARD TURNER

Mailing Address 4729 OLD POST RD.

City State Zip Code
EVANS GA 30809-5833

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SAIC INTELLIGENCE COMPUTER SYSTEMS ENG

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 7 / 2 0 1 0

Transaction ID: SA11.13969883

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. RICHARD J. TURNER

Mailing Address 2727 WHITEGATE DR

City State Zip Code
FORT WAYNE IN 46805-2434

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 286.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918815

Amount of Each Receipt this Period

20.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. RICHARD J. TURNER

Mailing Address 2727 WHITEGATE DR

City State Zip Code
FORT WAYNE IN 46805-2434

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 286.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952275

Amount of Each Receipt this Period

40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2281 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RICHARD J. TURNER

Mailing Address 2727 WHITEGATE DR

City State Zip Code
FORT WAYNE IN 46805-2434

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
286.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	5	/	2	0	1	0

Transaction ID: SA11.13966209

Amount of Each Receipt this Period
41.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WARREN H. TURNER

Mailing Address 500 OCEAN DR.
APARTMENT W12C

City State Zip Code
JUNO BEACH FL 33408-1748

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
251.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13934072

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WARREN H. TURNER

Mailing Address 500 OCEAN DR.
APARTMENT W12C

City State Zip Code
JUNO BEACH FL 33408-1748

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
251.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	1	0

Transaction ID: SA11.13962893

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **141.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2282 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DARLENE M. TURNPAUGH		Date of Receipt
	Mailing Address 4166 E COUNTY ROAD 800 S		<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	WALTON	IN	46994-9318
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: SA11.13944819
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="75.00"/>
		<input type="text" value="275.00"/>	CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MR. ROBERT TUTTERROW		Date of Receipt
	Mailing Address 11621 HIGHWAY 157		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	RISING FAWN	GA	30738-2344
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: SA11.13928965
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="100.00"/>
		<input type="text" value="400.00"/>	CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MR. ROBERT TUTTERROW		Date of Receipt
	Mailing Address 11621 HIGHWAY 157		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	RISING FAWN	GA	30738-2344
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: SA11.13937190
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="50.00"/>
		<input type="text" value="400.00"/>	CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="225.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2283 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT TUTTERROW

Mailing Address 11621 HIGHWAY 157

City State Zip Code
RISING FAWN GA 30738-2344

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950004

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. LEE L. TUTTLE, JR.

Mailing Address 2213 FAIRVIEW STREET

City State Zip Code
HOUSTON TX 77019-6615

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962610

Amount of Each Receipt this Period
75.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CONRAD J. TUZA

Mailing Address 835 SAVANNAH HWY

City State Zip Code
CHARLESTON SC 29407-7215

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 1 0

Transaction ID: SA11.13967915

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 425.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2284 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ERLING TWEDT

Mailing Address 203 S 8TH AVE E

City LAKE MILLS State IA Zip Code 50450-1827

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13950503
 Amount of Each Receipt this Period: 50.00
CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ERLING TWEDT

Mailing Address 203 S 8TH AVE E

City LAKE MILLS State IA Zip Code 50450-1827

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt: 10 / 28 / 2010
Transaction ID: SA11.13960218
 Amount of Each Receipt this Period: 55.00
CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. CHARLES D. TYLER

Mailing Address 2713 FOX GLENN CT

City HURST State TX Zip Code 76054-2786

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 427.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13941480
 Amount of Each Receipt this Period: 51.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 156.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2285 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. MARGARET L. TYLER

Mailing Address 6313 ASHMORE LN

City TYLER State TX Zip Code 75703-5817

FEC ID number of contributing federal political committee. **C**

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 775.00

Date of Receipt: 10 / 14 / 2010
Transaction ID: SA11.13930386
Amount of Each Receipt this Period: 105.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. MARGARET L. TYLER

Mailing Address 6313 ASHMORE LN

City TYLER State TX Zip Code 75703-5817

FEC ID number of contributing federal political committee. **C**

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 775.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13951827
Amount of Each Receipt this Period: 105.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT L. TYNER

Mailing Address 3730 WOODLANE RD

City GAINESVILLE State GA Zip Code 30506-2031

FEC ID number of contributing federal political committee. **C**

Name of Employer: INFORMATION REQUESTED PER BEST EFFORTS Occupation: INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13931916
Amount of Each Receipt this Period: 60.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

270.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2286 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DON TYSON

Mailing Address **PO BOX 2020**

City **SPRINGDALE** State **AR** Zip Code **72765-2020**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TYSON FOODS** Occupation **EXECUTIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **10000.00**

Date of Receipt **10 / 25 / 2010**

Transaction ID: SA11.13957956

Amount of Each Receipt this Period **10000.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN TYSON

Mailing Address **PO BOX 2020**

City **SPRINGDALE** State **AR** Zip Code **72765-2020**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TYSON FOODS** Occupation **EXECUTIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **10000.00**

Date of Receipt **10 / 25 / 2010**

Transaction ID: SA11.13957957

Amount of Each Receipt this Period **10000.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. SCOTT A. TYSON

Mailing Address **PO BOX 501**

City **NASHVILLE** State **NC** Zip Code **27856-0501**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **TOBACCO FARMER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **410.00**

Date of Receipt **10 / 25 / 2010**

Transaction ID: SA11.13947752

Amount of Each Receipt this Period **410.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **20410.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2287 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
WILLIAM H. TYSON

Mailing Address 304 E MAIN ST #1-1

City State Zip Code
CAMP HILL PA 17011-6321

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 586.57

Date of Receipt
MM / DD / YYYY
10 / 14 / 2010

Transaction ID: SA11.13929846

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. HELEN UEBELE

Mailing Address 33419 HIGH DR

City State Zip Code
EAST TROY WI 53120-9620

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BIS AUTOMATION FIELD ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
10 / 27 / 2010

Transaction ID: SA11.13955858

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. CAROL L. UFFNER

Mailing Address 11309 SHADYWOOD DR

City State Zip Code
BRIGHTON MI 48114-9248

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13941572

Amount of Each Receipt this Period
51.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 251.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2288 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) HELEN G. UITZ	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 244 ASPEN RD.	Transaction ID: SA11.13954662
	City State Zip Code YARDLEY PA 19067-5773	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 284.00	

B.	Full Name (Last, First, Middle Initial) MS. IRMGARD A. ULLIUS	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 2832 AIRPORT RD	Transaction ID: SA11.13952548
	City State Zip Code PANAMA CITY FL 32405-2850	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.00	

C.	Full Name (Last, First, Middle Initial) MR. DAVID F. ULLMAN	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 217 HIGHLAND AVE	Transaction ID: SA11.13956006
	City State Zip Code ORANGE NJ 07050-3207	Amount of Each Receipt this Period 35.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

SUBTOTAL of Receipts This Page (optional)	▶	185.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2289 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. THEODORE ULLYOT

Mailing Address 1230 LA CUMBRE ROAD

City Hillsborough State CA Zip Code 94010-6646

FEC ID number of contributing federal political committee. **C**

Name of Employer FACEBOOK, INC. Occupation GENERAL COUNSEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 6500.00

Date of Receipt 10 / 26 / 2010
Transaction ID: SA11.13955649
Amount of Each Receipt this Period 6500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. REINHARD R. ULRICH

Mailing Address 11309 HUNTOVER DR

City Rockville State MD Zip Code 20852-3615

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1265.00

Date of Receipt 10 / 20 / 2010
Transaction ID: SA11.13944446
Amount of Each Receipt this Period 50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. REINHARD R. ULRICH

Mailing Address 11309 HUNTOVER DR

City Rockville State MD Zip Code 20852-3615

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1265.00

Date of Receipt 10 / 25 / 2010
Transaction ID: SA11.13955160
Amount of Each Receipt this Period 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 6600.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2290 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) STEPHANIE UMBACH</p> <p>Mailing Address 2302 LINDEN DR.</p> <p>City State Zip Code VALPARAISO IN 46383-2333</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer INFORMATION REQUESTED PER BEST EFFORTS</p> <p>Occupation INFORMATION REQUESTED PER BEST EFFORTS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 220.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 21 / 2010</p> <p>Transaction ID: SA11.13946126</p> <p>Amount of Each Receipt this Period 60.00</p> <p>CONTRIBUTION</p>
---	---

<p>B. Full Name (Last, First, Middle Initial) STEPHANIE UMBACH</p> <p>Mailing Address 2302 LINDEN DR.</p> <p>City State Zip Code VALPARAISO IN 46383-2333</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer INFORMATION REQUESTED PER BEST EFFORTS</p> <p>Occupation INFORMATION REQUESTED PER BEST EFFORTS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 220.00</p>	<p>Date of Receipt MM / DD / YYYY 11 / 01 / 2010</p> <p>Transaction ID: SA11.13962913</p> <p>Amount of Each Receipt this Period 40.00</p> <p>CONTRIBUTION</p>
---	---

<p>C. Full Name (Last, First, Middle Initial) STEPHANIE UMBACH</p> <p>Mailing Address 2302 LINDEN DR.</p> <p>City State Zip Code VALPARAISO IN 46383-2333</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer INFORMATION REQUESTED PER BEST EFFORTS</p> <p>Occupation INFORMATION REQUESTED PER BEST EFFORTS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 220.00</p>	<p>Date of Receipt MM / DD / YYYY 11 / 01 / 2010</p> <p>Transaction ID: SA11.13963478</p> <p>Amount of Each Receipt this Period 40.00</p> <p>CONTRIBUTION</p>
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<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>140.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2291 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROLAND Z. UNANGST

Mailing Address 205 AMBER LN

City State Zip Code
GENESEO IL 61254-9125

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13931766

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CLETIS UNDERWOOD

Mailing Address 3821 BRANDONSHIRE DR

City State Zip Code
SPRINGFIELD IL 62704-5587

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
370.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13934598

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CLETIS UNDERWOOD

Mailing Address 3821 BRANDONSHIRE DR

City State Zip Code
SPRINGFIELD IL 62704-5587

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
370.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13936254

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **90.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2292 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DAVID W. UNDERWOOD

Mailing Address 31 NORTHHAVEN DR

City State Zip Code
JACKSON TN 38305-8111

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HUGHES EYE CENTER OPHTHALMOLOGIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13943581
Amount of Each Receipt this Period: 200.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LAWRENCE UNG

Mailing Address 800 GABEL STREET

City State Zip Code
SILVER SPRING MD 20901-1018

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DAYS INN MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt: 11 / 04 / 2010
Transaction ID: SA11.13965165
Amount of Each Receipt this Period: 60.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. LOUISE UNGER

Mailing Address 67 PURDY LANE

City State Zip Code
AMITYVILLE NY 11701-3921

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA11.13931328
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 285.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2293 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. LOUISE UNGER

Mailing Address 67 PURDY LANE

City State Zip Code
AMITYVILLE NY 11701-3921

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963712

Amount of Each Receipt this Period

35.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
ROBERT UNGER

Mailing Address 7712 RAGALL PKWY

City State Zip Code
CLEVELAND OH 44130-6413

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944719

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
ROBERT UNGER

Mailing Address 7712 RAGALL PKWY

City State Zip Code
CLEVELAND OH 44130-6413

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946493

Amount of Each Receipt this Period

20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2294 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES A. UNNERSTALL

Mailing Address 20723 HUNT CLUB DR

City State Zip Code
FRANKFORT IL 60423-1376

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943338

Amount of Each Receipt this Period
400.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ARCH UNRUH

Mailing Address 8551 HIGH DR.

City State Zip Code
LEAWOOD KS 66206-1527

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 745.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941957

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ARCH UNRUH

Mailing Address 8551 HIGH DR.

City State Zip Code
LEAWOOD KS 66206-1527

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 745.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956547

Amount of Each Receipt this Period
70.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **520.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2295 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ARCH UNRUH
Mailing Address 8551 HIGH DR.
City LEAWOOD State KS Zip Code 66206-1527
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 745.00
Date of Receipt 10 / 26 / 2010
Transaction ID: SA11.13956602
Amount of Each Receipt this Period 30.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CALVIN K. UPP
Mailing Address 212 N ELM ST.
City WELLINGTON State KS Zip Code 67152-2937
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 535.00
Date of Receipt 11 / 16 / 2010
Transaction ID: SA11.13969220
Amount of Each Receipt this Period 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RAYMOND URBAN
Mailing Address POB 42
City DELAWARE State OH Zip Code 43015-0042
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 10 / 21 / 2010
Transaction ID: SA11.13945199
Amount of Each Receipt this Period 250.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 380.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2296 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. LEE USHER	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 216 MOORE RD APT 2L	Transaction ID: SA11.13947246
	City AVON LAKE State OH Zip Code 44012-1240	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 226.00	

B.	Full Name (Last, First, Middle Initial) MR. LEE USHER	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 216 MOORE RD APT 2L	Transaction ID: SA11.13956142
	City AVON LAKE State OH Zip Code 44012-1240	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 226.00	

C.	Full Name (Last, First, Middle Initial) MR. PAUL NUSCHKE USN	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 6932 AUGUSTA NATIONAL	Transaction ID: SA11.13959573
	City FAYETTEVILLE State PA Zip Code 17222-9410	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	140.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2297 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. PAUL C. UTESCH		Date of Receipt	
	Mailing Address 3011 KNOLL LN NW		M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11.13943851
	ROCHESTER	MN	55901-1492	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		26.00	
Name of Employer RETIRED		Occupation RETIRED		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 206.00		

B.	Full Name (Last, First, Middle Initial) MRS. LESLIE A. UTLAUT		Date of Receipt	
	Mailing Address 30335 HIGHWAY 24		M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11.13951025
	WAVERLY	MO	64096-9106	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		80.00	
Name of Employer RETIRED		Occupation RETIRED		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 295.00		

C.	Full Name (Last, First, Middle Initial) MRS. CAROL VACCA		Date of Receipt	
	Mailing Address P.O. BOX 174		M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11.13968293
	SHARON SPGS	NY	13459-0174	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		25.00	
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 205.00		

SUBTOTAL of Receipts This Page (optional)	▶	131.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2298 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. STEPHEN J. VACCARO, JR.	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 1356 EAGLES TRACE	Transaction ID: SA11.13953063
	City State Zip Code LANCASTER VA 22503-2453	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 485.00	

B.	Full Name (Last, First, Middle Initial) MR. JOHN VALDATA	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 108 LATHAM CIR	Transaction ID: SA11.13941057
	City State Zip Code SAUGERTIES NY 12477-4214	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

C.	Full Name (Last, First, Middle Initial) MR. MARK VALENTE, III	Date of Receipt MM / DD / YYYY 10 / 29 / 2010
	Mailing Address 600 14TH STREET NW VALENTE & ASSOCIATES 5TH FLOOR	Transaction ID: SA11.13961225
	City State Zip Code WASHINGTON DC 20005-2008	Amount of Each Receipt this Period 10000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer VALENTE & ASSOCIATES	Occupation PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

SUBTOTAL of Receipts This Page (optional)	▶	10225.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2299 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
SUSAN VALERIA BRUNOFF

Mailing Address 334 W CEDAR ST.

City State Zip Code
NEW HOLLAND PA 17557-1202

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 640.00

Date of Receipt M M / D D / Y Y Y Y
10 / 21 / 2010

Transaction ID: SA11.13946545

Amount of Each Receipt this Period
60.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. GINA VALITUTTO

Mailing Address 56 CONYINGHAM AVE

City State Zip Code
STATEN ISLAND NY 10301-2011

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt M M / D D / Y Y Y Y
10 / 28 / 2010

Transaction ID: SA11.13957691

Amount of Each Receipt this Period
75.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT R. VALLEE

Mailing Address 623 STOLP AVENUE

City State Zip Code
SYRACUSE NY 13207-1227

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt M M / D D / Y Y Y Y
10 / 27 / 2010

Transaction ID: SA11.13958577

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 185.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2300 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES R. VALPEY

Mailing Address 696 CARMELITA ST.

City PORTERVILLE State CA Zip Code 93257-2120

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt: 11 / 18 / 2010
Transaction ID: SA11.13971426
 Amount of Each Receipt this Period: 40.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BARBARA VAN AMBERG

Mailing Address 101 NEWBERRY LN.

City HOWELL State MI Zip Code 48843-9567

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 376.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13932602
 Amount of Each Receipt this Period: 51.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BARBARA VAN AMBERG

Mailing Address 101 NEWBERRY LN.

City HOWELL State MI Zip Code 48843-9567

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 376.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13954408
 Amount of Each Receipt this Period: 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **141.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2301 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
LEWIS VAN AMERONGEN

Mailing Address 45 EAST 62ND ST

City State Zip Code
NEW YORK NY 10065-8014

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LVA ENTERPRISES LLC INVESTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13932354
Amount of Each Receipt this Period: 1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. DORINDA W. VAN BURKLEO

Mailing Address 1400 W IRIS AVE.

City State Zip Code
MCALLEN TX 78501-3959

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 11 / 15 / 2010
Transaction ID: SA11.13968882
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. DEBORAH VAN DORMOLEN

Mailing Address 1507 HILLTOP CIR

City State Zip Code
SALADO TX 76571-5630

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13936914
Amount of Each Receipt this Period: 150.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1200.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2302 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. GARRETT J. VAN GIESSEN

Mailing Address 2417 HEMLOCK AVE.

City State Zip Code
PORTAGE MI 49024-1107

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 351.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 18 / 2010

Transaction ID: SA11.13932985

Amount of Each Receipt this Period

101.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. D. MICHAEL VAN KONYNENBURG

Mailing Address 13681 W. SUNSET BLVD

City State Zip Code
PACIFIC PALISADES CA 90272-4019

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EASTDIL SECURED REAL ESTATE

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 2500.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 14 / 2010

Transaction ID: SA11.13932249

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DR. CHARLES H. VAN OPPEN

Mailing Address 90 PROSPECT ST

City State Zip Code
ALEXANDRIA LA 71301-5747

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 301.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 18 / 2010

Transaction ID: SA11.13933275

Amount of Each Receipt this Period

101.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2702.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2303 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. CLARENCE VAN VOORST

Mailing Address 607 BLACK FOREST RD.

City State Zip Code
HULL IA 51239-7486

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED CONTRACT SPECIALIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955840

Amount of Each Receipt this Period
210.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
HELMER VAN VUREN

Mailing Address 1424 TIFFANY CIRCLE

City State Zip Code
ROSEVILLE CA 95661-4632

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954028

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. J. R. VANBUSKIRK

Mailing Address 10240 E PALO BREA DR.

City State Zip Code
SCOTTSDALE AZ 85262-2929

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933545

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **435.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2304 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. CHRISTIAAN J. VANDENBERG	Date of Receipt MM / DD / YYYY 11 / 12 / 2010
	Mailing Address 7951 E MAPLEWOOD AVE STE 327	Transaction ID: SA11.13967721
	City State Zip Code GREENWOOD VILLAGE CO 80111-4774	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation Q DATA USA, INC. CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) MR. JOHN N. VANDERSCHAAF	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 97 CANVASBACK CT	Transaction ID: SA11.13931803
	City State Zip Code BREVARD NC 28712-9108	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

C.	Full Name (Last, First, Middle Initial) MRS. LINDA S. VANDERGALIEN	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address P.O. BOX 144	Transaction ID: SA11.13929119
	City State Zip Code RANDOLPH WI 53956-0144	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation HOMEMAKER HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	

SUBTOTAL of Receipts This Page (optional)	345.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2305 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. LINDA S. VANDERGALIEN

Mailing Address P.O. BOX 144

City

RANDOLPH

State

WI

Zip Code

53956-0144

FEC ID number of contributing federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13971797

Amount of Each Receipt this Period

40.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

ROBERT VANDERBROUK

Mailing Address 41 W 86TH ST

City

NEW YORK

State

NY

Zip Code

10024-3608

FEC ID number of contributing federal political committee.

C

Name of Employer
NYSE EURONEXT

Occupation
GLOBAL AFFAIRS

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918889

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. SHIRLEY VANDERBURG

Mailing Address 1205 VALLEY DRIVE

City

FESTUS

State

MO

Zip Code

63028-1067

FEC ID number of contributing federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

291.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946784

Amount of Each Receipt this Period

31.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

321.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2306 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
THOMAS VANDERVORT

Mailing Address 212 POWDER HOUSE BLVD

City State Zip Code
SOMERVILLE MA 02144-1531

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DELTEK PRODCUCT MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 628.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13955652

Amount of Each Receipt this Period
339.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. JAMES M. VANDIVIER

Mailing Address 2830 LAKE FOREST DR.

City State Zip Code
INDIANAPOLIS IN 46268-1244

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CARE GRP. PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 1 0

Transaction ID: SA11.13970061

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. DAVID O. VANEENENAAM

Mailing Address 429 FLOWER AVENUE W.

City State Zip Code
WATERTOWN NY 13601-3940

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932599

Amount of Each Receipt this Period
51.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **415.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2307 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DR. DAVID O. VANEENENAAM	Date of Receipt MM / DD / YYYY 11 / 02 / 2010
	Mailing Address 429 FLOWER AVENUE W.	Transaction ID: SA11.13962579
	City State Zip Code WATERTOWN NY 13601-3940	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

B.	Full Name (Last, First, Middle Initial) MS. DONNA L. VANIER	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address P.O. BOX 37	Transaction ID: SA11.13951992
	City State Zip Code BROOKVILLE KS 67425-0037	Amount of Each Receipt this Period 339.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 889.00	

C.	Full Name (Last, First, Middle Initial) MS. DONNA L. VANIER	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address P.O. BOX 37	Transaction ID: SA11.13957388
	City State Zip Code BROOKVILLE KS 67425-0037	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 889.00	

SUBTOTAL of Receipts This Page (optional)	489.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2308 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. VERNON VANIS	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 15903 MAPLEHURST DR	Transaction ID: SA11.13938543
	City State Zip Code SPRING TX 77379-6845	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation LION COPOLYMER R&D DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) MAURICE VANNOTE	Date of Receipt MM / DD / YYYY 11 / 16 / 2010
	Mailing Address 2926 PALO MARSH RD.	Transaction ID: SA11.13969276
	City State Zip Code PALO IA 52324-9638	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SELF-EMPLOYED FARMER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

C.	Full Name (Last, First, Middle Initial) MS. JANE VANSANTEN	Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address 12 LANA LN UNIT A	Transaction ID: SA11.13960716
	City State Zip Code HOUSTON TX 77027-5640	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

SUBTOTAL of Receipts This Page (optional)	▶	220.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2309 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

ARIE J. VANWINGERDEN

Mailing Address 928 VINE AVE

City State Zip Code
SUNNYSIDE WA 98944-1744

FEC ID number of contributing federal political committee. **C**

Name of Employer
SUNNYSIDE COMMUNITY HOSPITAL

Occupation
PHARMASIST

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930677

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. HAROLD B. VARNER

Mailing Address 22 ATHEM DRIVE

City State Zip Code
GLEN COVE NY 11542-1241

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939199

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. LOTHAR A. VASHOLZ

Mailing Address 37309 PINEKNOLL AVE

City State Zip Code
PALM DESERT CA 92211-2137

FEC ID number of contributing federal political committee. **C**

Name of Employer
SELF-EMPLOYED

Occupation
SELF-EMPLOYED

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954350

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2310 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DUDLEY J. VAUGHAN, III

Mailing Address 94 RALPHS CT.

City MARTINSBURG State WV Zip Code 25404-0663

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13950519
 Amount of Each Receipt this Period: 150.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. HERBERT VAUGHAN

Mailing Address 10 LONGWOOD DR. APT. 464
APT 464

City WESTWOOD State MA Zip Code 02090-1146

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 11 / 01 / 2010
Transaction ID: SA11.13963543
 Amount of Each Receipt this Period: 240.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. JUANITA C. VAUGHN

Mailing Address 69 EMBERS DR

City HIGHLANDS State NC Zip Code 28741-8943

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA11.13931388
 Amount of Each Receipt this Period: 150.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 540.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2311 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. KYLE N. VAUGHT

Mailing Address 5452 SIERRA ROJA RD

City State Zip Code
IRVINE CA 92603-3830

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED AEROSPACE CONSULTANT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 656.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951516

Amount of Each Receipt this Period

155.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. LLOYD VAUGHAN

Mailing Address 11817 BUFFALO CREEK PL

City State Zip Code
DALLAS TX 75230-2355

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
VAUGHAN HOLLAND CONSULT CONSULTANT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13928417

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. C. DEAN VAUSBINDER

Mailing Address 23848 CORTE EMERADO

City State Zip Code
MURRIETA CA 92562-5510

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13965221

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1255.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2312 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
L.T. VEATCH

Mailing Address 8801 FAWN TRAIL CT

City State Zip Code
DERBY KS 67037-9705

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
EMPRISE FINANCIAL CORP CFO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
320.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955152

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. BUTCH VEAZEY

Mailing Address 950 SYMPHONY ST.

City State Zip Code
LAKE FOREST IL 60045-4232

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
SELF-EMPLOYED VIDEO PRODUCER/EDITOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951666

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. CAROLINE VELDHOUSE

Mailing Address 3500 S KING ST
LOT 22

City State Zip Code
DENVER CO 80236-6166

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
290.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929513

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

400.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2313 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. NANCY VENCIL

Mailing Address 2254 OLD HOLLOW RD

City State Zip Code
MECHANICSBURG PA 17055-9219

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
265.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 01 / 2010

Transaction ID: SA11.13960783

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MONIQUE VERBEKE

Mailing Address 206 E MORNINGSIDE DR.

City State Zip Code
PEORIA IL 61614-2133

FEC ID number of contributing federal political committee. **C**

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 19 / 2010

Transaction ID: SA11.13941981

Amount of Each Receipt this Period

1.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MONIQUE VERBEKE

Mailing Address 206 E MORNINGSIDE DR.

City State Zip Code
PEORIA IL 61614-2133

FEC ID number of contributing federal political committee. **C**

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 25 / 2010

Transaction ID: SA11.13954648

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

161.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2314 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MONIQUE VERBEKE

Mailing Address 206 E MORNINGSIDE DR.

City State Zip Code
PEORIA IL 61614-2133

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955289

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MONIQUE VERBEKE

Mailing Address 206 E MORNINGSIDE DR.

City State Zip Code
PEORIA IL 61614-2133

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 4 / 2 0 1 0

Transaction ID: SA11.13965494

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. DON VERNON

Mailing Address 1448 SNATA LUISA DR

City State Zip Code
SOLANA BEACH CA 92075-1619

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2360.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930378

Amount of Each Receipt this Period

350.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2315 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. LAURA VEROS
Mailing Address P.O. BOX 1018
City WURTSBORO State NY Zip Code 12790-1018
FEC ID number of contributing federal political committee. **C**
Name of Employer SULLIVANT COUNTY VOCS Occupation TEACHER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00
Date of Receipt 10 / 26 / 2010
Transaction ID: SA11.13957384
Amount of Each Receipt this Period 20.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. SALVATORE PATRICK VETERE
Mailing Address 16338 87 STREET
City HOWARD BEACH State NY Zip Code 11414-3342
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00
Date of Receipt 11 / 01 / 2010
Transaction ID: SA11.13960889
Amount of Each Receipt this Period 30.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. CAROLYN VETOVICH
Mailing Address 293 SPRING RUN ROAD
City CRESCENT State PA Zip Code 15046-4902
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13932611
Amount of Each Receipt this Period 51.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 101.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2316 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MARK VIAN

Mailing Address 22406 HIDDEN RANCH

City State Zip Code
AUBURN CA 95602-8551

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BROACH MASTERS BUSINESS OWNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929227

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JOAQUIM D. VICENTE

Mailing Address 75 SHADY RIVER CIR

City State Zip Code
SACRAMENTO CA 95831-2518

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 8 / 2 0 1 0

Transaction ID: SA11.13966675

Amount of Each Receipt this Period
26.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. BILLY J. VICIC

Mailing Address 5300 HOLLISTER SUITE 530

City State Zip Code
HOUSTON TX 77040-6138

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BLACKSTONE INSURANCE SERVICES, INC. CEO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957936

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2626.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2317 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ACIE VICKERS

Mailing Address 9441 NEWBRIDGE DRIVE

City State Zip Code
POTOMAC MD 20854-4460

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DIGITAL ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930351

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ACIE VICKERS

Mailing Address 9441 NEWBRIDGE DRIVE

City State Zip Code
POTOMAC MD 20854-4460

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DIGITAL ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 1 0

Transaction ID: SA11.13947684

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ACIE VICKERS

Mailing Address 9441 NEWBRIDGE DRIVE

City State Zip Code
POTOMAC MD 20854-4460

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DIGITAL ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3250.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 7 / 2 0 1 0

Transaction ID: SA11.13969874

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 3000.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2318 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. DAVID VICKERS	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 1811 DRAKE LANE	Transaction ID: SA11.13931473
	City State Zip Code LONDON KY 40741-9751	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer EDWARD D JONES & CO. L.P.	Occupation PRINCIPAL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) MRS. DEBBIE DENICE VICKERS	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 111 ROCHELLE ST. BOX 39	Transaction ID: SA11.13935495
	City State Zip Code BRADY TX 76825	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer HOMEMAKER	Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 476.00	

C.	Full Name (Last, First, Middle Initial) JOSEPH M. VIDMAR	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address P.O. BOX 3413	Transaction ID: SA11.13928358
	City State Zip Code KINGMAN AZ 86402-3413	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

SUBTOTAL of Receipts This Page (optional)	375.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2319 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JOSEPH M. VIDMAR
Mailing Address P.O. BOX 3413
City KINGMAN State AZ Zip Code 86402-3413
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 245.00
Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13940958
Amount of Each Receipt this Period 30.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOSEPH M. VIDMAR
Mailing Address P.O. BOX 3413
City KINGMAN State AZ Zip Code 86402-3413
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 245.00
Date of Receipt 10 / 20 / 2010
Transaction ID: SA11.13944397
Amount of Each Receipt this Period 40.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JEFFREY W. VIETH
Mailing Address 10935 COUNTY HIGHWAY I
City SPARTA State WI Zip Code 54656-6450
FEC ID number of contributing federal political committee. **C**
Name of Employer VIETH CONSTRUCTION Occupation OWNER
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1020.00
Date of Receipt 10 / 26 / 2010
Transaction ID: SA11.13951552
Amount of Each Receipt this Period 510.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 580.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2320 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
LEONARD VIGIL

Mailing Address 121 CARLITO RD NW

City State Zip Code
ALBUQUERQUE NM 87107-6011

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AT&T ENGINEER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 280.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13971618

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. DOROTHY VILLARD

Mailing Address 10101 BRIGADOON ROSE ST

City State Zip Code
BAKERSFIELD CA 93311-3752

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 330.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951645

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
FRANCESKA A. VILLARE

Mailing Address 560 MANTUA AVE

City State Zip Code
PAULSBORO NJ 08066-1177

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 228.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937120

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 115.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2321 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) FRANCESKA A. VILLARE	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 560 MANTUA AVE	Transaction ID: SA11.13943406
	City PAULSBORO State NJ Zip Code 08066-1177	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 228.00

B.	Full Name (Last, First, Middle Initial) FRANCESKA A. VILLARE	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 560 MANTUA AVE	Transaction ID: SA11.13944535
	City PAULSBORO State NJ Zip Code 08066-1177	Amount of Each Receipt this Period 38.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 228.00

C.	Full Name (Last, First, Middle Initial) FRANCESKA A. VILLARE	Date of Receipt MM / DD / YYYY 11 / 22 / 2010
	Mailing Address 560 MANTUA AVE	Transaction ID: SA11.13972959
	City PAULSBORO State NJ Zip Code 08066-1177	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 228.00

SUBTOTAL of Receipts This Page (optional)	▶	113.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2322 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. DAVID W. VINCENT

Mailing Address 603 E DIVISION ST

City State Zip Code
JENNINGS LA 70546-6215

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 245.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931799

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
STEPHEN VINCELLI

Mailing Address 910 CAMERON BRIDGE DRIVE

City State Zip Code
AMERY WI 54001-5231

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FEDERAL FOAM PLANT MANAGER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 295.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955922

Amount of Each Receipt this Period

85.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
COL. GEORGE C. VINEY

Mailing Address 7400 CRESTWAY DRIVE
APARTMENT 703

City State Zip Code
SAN ANTONIO TX 78239-3089

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 307.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959547

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

245.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2323 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. KATHRYN A. VINEYARD		Date of Receipt
	Mailing Address 791 BELLEROSE DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 6 / 2 0 1 0
	City	State	Zip Code
	SAN JOSE	CA	95128-1414
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13951376
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 385.00	<input type="text"/> 100.00
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MR. ANDRE VIOLA		Date of Receipt
	Mailing Address 7006 CARDIN RD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 9 / 2 0 1 0
	City	State	Zip Code
	PHILADELPHIA	PA	19128-1508
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13939198
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 240.00	<input type="text"/> 25.00
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MR. ANDRE VIOLA		Date of Receipt
	Mailing Address 7006 CARDIN RD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 9 / 2 0 1 0
	City	State	Zip Code
	PHILADELPHIA	PA	19128-1508
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13942285
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 240.00	<input type="text"/> 35.00
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 160.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2324 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. VIRGINIA M. VIRKLER

Mailing Address 2421 OCEAN SHORE CRES APT 401

City State Zip Code
VIRGINIA BEACH VA 23451-1282

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13932200

Amount of Each Receipt this Period
75.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. VIRGINIA M. VIRKLER

Mailing Address 2421 OCEAN SHORE CRES APT 401

City State Zip Code
VIRGINIA BEACH VA 23451-1282

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 1 0

Transaction ID: SA11.13971053

Amount of Each Receipt this Period
80.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. LOUIS VIZZACCARO

Mailing Address 21404 18TH AVE
FL 1

City State Zip Code
BAYSIDE NY 11360-1636

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PALAIDIUM BUILDERS INCORPORATED PRESIDENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928810

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 655.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2325 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) FRANCES I. VOELKLE	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address P.O. BOX 34	Transaction ID: SA11.13940146
	City State Zip Code SHERMAN TX 75091-0034	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation VFW POST 2772 BOOKKEEPER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

B.	Full Name (Last, First, Middle Initial) MR. FARREL VOGELHUT	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 39 BRAINARD ROAD	Transaction ID: SA11.13945192
	City State Zip Code WEST HARTFORD CT 06117-2203	Amount of Each Receipt this Period 39.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation UNITED TECHNOLOGIES CORP. ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 428.00	

C.	Full Name (Last, First, Middle Initial) MR. FARREL VOGELHUT	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 39 BRAINARD ROAD	Transaction ID: SA11.13945255
	City State Zip Code WEST HARTFORD CT 06117-2203	Amount of Each Receipt this Period 39.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation UNITED TECHNOLOGIES CORP. ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 428.00	

SUBTOTAL of Receipts This Page (optional)	138.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2326 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. LEONARD H. VOGEL		Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 2825 BLOOMFIELD RD		Transaction ID: SA11.13931823
	City State Zip Code CAPE GIRARDEAU MO 63703-6335	Amount of Each Receipt this Period 160.00	
	FEC ID number of contributing federal political committee. C	CONTRIBUTION	
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	Aggregate Year-to-Date 370.00

B.	Full Name (Last, First, Middle Initial) SHERMAN C. VOGEL		Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 7110 MELROSE CASTLE LN		Transaction ID: SA11.13932702
	City State Zip Code BOCA RATON FL 33496-1424	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C	CONTRIBUTION	
	Name of Employer RETIRED	Occupation RETIRED	Aggregate Year-to-Date 300.00

C.	Full Name (Last, First, Middle Initial) MR. KENNETH VOGES		Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 11113 OBST RD.		Transaction ID: SA11.13956575
	City State Zip Code RED BUD IL 62278-4225	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C	CONTRIBUTION	
	Name of Employer RETIRED	Occupation RETIRED	Aggregate Year-to-Date 1500.00

SUBTOTAL of Receipts This Page (optional)	760.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2327 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. FREDERICK W. VOGT

Mailing Address **15310 NE 14TH PLACE**

City **WILLISTON** State **FL** Zip Code **32696-8632**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **10 / 19 / 2010**

Transaction ID: SA11.13931784

Amount of Each Receipt this Period **75.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RONALD VOIGT

Mailing Address **3216 NESTLEWOOD DR**

City **OAK HILL** State **VA** Zip Code **20171-3933**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **385.00**

Date of Receipt **10 / 20 / 2010**

Transaction ID: SA11.13943522

Amount of Each Receipt this Period **200.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. HELEN R. VOLCKMANN

Mailing Address **306 PROSPECT ST**

City **MORRISON** State **IL** Zip Code **61270-2221**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **10 / 25 / 2010**

Transaction ID: SA11.13952913

Amount of Each Receipt this Period **110.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **385.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2328 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. CHERYL A. VOLESKY	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 1004 BARBI CT	Transaction ID: SA11.13931444
	City State Zip Code CASTLE ROCK CO 80104-1602	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer DOUGLAS CO SCHOOL DIST	Occupation EDUCATIONAL ASST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

B.	Full Name (Last, First, Middle Initial) MR. JOEL G. VOLLE	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 836 N SUMMIT ST	Transaction ID: SA11.13957699
	City State Zip Code WHEATON IL 60187-4454	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) CLYDE VON DER	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 226 S RIMPAU BLVD.	Transaction ID: SA11.13950161
	City State Zip Code LOS ANGELES CA 90004-3733	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	▶	220.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2329 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. OLAF T. VON RAMM

Mailing Address 4718 HARMONY CHURCH RD

City State Zip Code
EFLAND NC 27243-9383

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DUKE UNIVERSITY PROFESSOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1180.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13918427

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. WILLIAM H. VOORHEES

Mailing Address 12928 GREENSWITCH RD

City State Zip Code
MAROA IL 61756-9018

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED FARMER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13964427

Amount of Each Receipt this Period
45.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. WALTER L. VOSHEL

Mailing Address P.O. BOX 325

City State Zip Code
LOWELL OH 45744-0325

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961850

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

270.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2330 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GEORGE VRADENBURG, II

Mailing Address 2901 WOODLAND DRIVE NW

City State Zip Code
WASHINGTON DC 20008-3542

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AMERICA ONLINE SENIOR VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt: 11 / 03 / 2010
Transaction ID: SA11.13966028
Amount of Each Receipt this Period: 15000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PAT D. VYAS

Mailing Address P.O. BOX 11100

City State Zip Code
HONOLULU HI 96828-0100

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PATRICK VYAS CPA, INC. INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 11 / 01 / 2010
Transaction ID: SA11.13963671
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. VERA C. WACHTER

Mailing Address 1225 LUTHER LN APT 245D

City State Zip Code
ARLINGTON HEIGHTS IL 60004-8133

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA11.13928269
Amount of Each Receipt this Period: 10.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 15110.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2331 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. JOHN WADDELL	Date of Receipt MM / DD / YYYY 11 / 08 / 2010
	Mailing Address 12080 MELLON BRIDGE RD	Transaction ID: SA11.13966810
	City State Zip Code PLATTE CITY MO 64079-8141	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 335.00	

B.	Full Name (Last, First, Middle Initial) MRS. PATTI WADDELL	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 12080 MELLON BRIDGE RD	Transaction ID: SA11.13929482
	City State Zip Code PLATTE CITY MO 64079-8141	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer HORTLAND HEALTH SYSTEMS	Occupation NURSE PRACTITIONER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) MS. SHAREE WADDLE	Date of Receipt MM / DD / YYYY 11 / 02 / 2010
	Mailing Address 4322 CRESCENT AVE	Transaction ID: SA11.13962563
	City State Zip Code CYPRESS CA 90630-2150	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00	

SUBTOTAL of Receipts This Page (optional)	225.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2332 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. DON W. WADE	Date of Receipt
	Mailing Address 6 LINDA VIS	<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City State Zip Code ORINDA CA 94563-2311	Transaction ID: SA11.13956348
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="564.00"/>	

B.	Full Name (Last, First, Middle Initial) MR. HAL WADE	Date of Receipt
	Mailing Address 1377 MCDANIEL RD	<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City State Zip Code CLARKSVILLE TN 37043-7932	Transaction ID: SA11.13961074
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="50.00"/>
Name of Employer CUSTOM GUNSMIHING	Occupation GUN SMITH	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="230.00"/>	

C.	Full Name (Last, First, Middle Initial) MR. BRADLEY S. WAGGONER	Date of Receipt
	Mailing Address 11611 POINTER RIDGE LANE	<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City State Zip Code CYPRESS TX 77433-1616	Transaction ID: SA11.1395970
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="2650.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2333 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. PAUL M. WAGGONER	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 600 E 73RD AVE	Transaction ID: SA11.13949824
	City HUTCHINSON State KS Zip Code 67502-9753	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer WAGGONERS INC Occupation GENERAL MANAGER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	

B.	Full Name (Last, First, Middle Initial) MR. WAYNE WAGGONER	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 1616 CEDAR ST. # 19D	Transaction ID: SA11.13941887
	City LAWRENCEVILLE State IL Zip Code 62439-2154	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1225.00	

C.	Full Name (Last, First, Middle Initial) MRS. EDITH B. WAGNER	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 7181 2ND ST	Transaction ID: SA11.13947827
	City W BLOOMFIELD State MI Zip Code 48324-3705	Amount of Each Receipt this Period 120.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 370.00	

SUBTOTAL of Receipts This Page (optional)	295.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2334 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ROGER E. WAGNER

Mailing Address P.O. BOX 192

City State Zip Code
TWIN FALLS ID 83303-0192

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WAGNER TRANSPORTATION CO. PRESIDENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13946430

Amount of Each Receipt this Period
75.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. THOMAS W. WAGNER

Mailing Address 30692 CONE COVE LN

City State Zip Code
PARK RAPIDS MN 56470-4121

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13963986

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. KARON L. WAGONER

Mailing Address 7712 REDBERRY STREET NW

City State Zip Code
ALBUQUERQUE NM 87120-5234

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
VAMC REGISTERED NURSE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13928912

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

225.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2335 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
CAROL L. WAHL

Mailing Address 8315 FAIRWAY LN.

City State Zip Code
ROGERS AR 72756-8079

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948385

Amount of Each Receipt this Period

1.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. DAVID WAHL

Mailing Address 102 WOODMONT WAY

City State Zip Code
RIDGELAND MS 39157-8618

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937882

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. ROGER WAHL DICK

Mailing Address 5510 RIVER BLUFF DRIVE

City State Zip Code
MINNEAPOLIS MN 55437-3611

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948317

Amount of Each Receipt this Period

350.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

551.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2336 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. LAMBERT K. WAI

Mailing Address 3921 GAIL ST

City State Zip Code
HONOLULU HI 96815-4502

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 236.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13939338

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN T. WAID

Mailing Address 118 FOX HOLLOW DR

City State Zip Code
METAMORA MI 48455-8990

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13935715

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. ELEANOR B. WAITE

Mailing Address 16655 LAKE CIRCLE DRIVE

City State Zip Code
STRONGSVILLE OH 44136-2470

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
11 / 08 / 2010

Transaction ID: SA11.13966788

Amount of Each Receipt this Period
35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **125.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2337 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. SUZANNE WALCHLI

Mailing Address 16915 KETCHAM LANE

City State Zip Code
LINDEN CA 95236-9753

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945311

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
KENNETH WALDO

Mailing Address 1000 DEERFIELD RD

City State Zip Code
RALEIGH NC 27609-5429

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
517.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13945291

Amount of Each Receipt this Period

40.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. C. ERNEST WALES

Mailing Address 8906 CARVEL LANE

City State Zip Code
HOUSTON TX 77036-6124

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
231.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 4 / 2 0 1 0

Transaction ID: SA11.13965660

Amount of Each Receipt this Period

30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

220.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2338 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MICHAEL WALES

Mailing Address 13 ARCADIA RD

City State Zip Code
OLD GREENWICH CT 06870

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GAIL DADDY INDUSTRIALIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 14 / 2010
Transaction ID: SA11.13930126
Amount of Each Receipt this Period: 250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DAVID WATSON WALKER

Mailing Address 95020 SPINNAKER COURT

City State Zip Code
FERNANDINA BEACH FL 32034-4392

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 10 / 23 / 2010
Transaction ID: SA11.13947636
Amount of Each Receipt this Period: 250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
EMORY J. WALKER

Mailing Address 6008 BRIARWOOD LN

City State Zip Code
FRISCO TX 75034-1862

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 286.00

Date of Receipt: 10 / 14 / 2010
Transaction ID: SA11.13929901
Amount of Each Receipt this Period: 1.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 501.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2339 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) F. WALKER	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 12053 EDGESTONE RD	Transaction ID: SA11.13930357
	City State Zip Code DALLAS TX 75230-2340	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00

B.	Full Name (Last, First, Middle Initial) JAMES E. WALKER, SR.	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 4036 HEALY CT.	Transaction ID: SA11.13952371
	City State Zip Code SAINT LOUIS MO 63123-7743	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 280.00

C.	Full Name (Last, First, Middle Initial) JAMES E. WALKER, SR.	Date of Receipt MM / DD / YYYY 11 / 19 / 2010
	Mailing Address 4036 HEALY CT.	Transaction ID: SA11.13972083
	City State Zip Code SAINT LOUIS MO 63123-7743	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 280.00

SUBTOTAL of Receipts This Page (optional)	▶	230.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2340 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DR. JOHN HOLLIS WALKER

Mailing Address 3102 BARCODY RD SE

City State Zip Code
HUNTSVILLE AL 35802-1146

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SPORTMED PHYSICIAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 650.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13955655

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. LOUIS WALKER

Mailing Address 732 AMELIA AVE

City State Zip Code
BROWNSVILLE OR 97327-2225

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941142

Amount of Each Receipt this Period

20.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. LOUIS WALKER

Mailing Address 732 AMELIA AVE

City State Zip Code
BROWNSVILLE OR 97327-2225

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951211

Amount of Each Receipt this Period

30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

300.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2341 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. LOUIS WALKER

Mailing Address 732 AMELIA AVE

City State Zip Code
BROWNSVILLE OR 97327-2225

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13951694

Amount of Each Receipt this Period

20.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. LOUIS WALKER

Mailing Address 732 AMELIA AVE

City State Zip Code
BROWNSVILLE OR 97327-2225

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952048

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. LOUIS WALKER

Mailing Address 732 AMELIA AVE

City State Zip Code
BROWNSVILLE OR 97327-2225

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953355

Amount of Each Receipt this Period

20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

65.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2342 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. MERRILL WALKER	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 1058 TITHING VIEW CT	Transaction ID: SA11.13939943
	City State Zip Code RIVERTON UT 84065-7006	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

B.	Full Name (Last, First, Middle Initial) MR. STEVE WALKER	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 1011 SUN VALLEY CT	Transaction ID: SA11.13955883
	City State Zip Code GREENSBORO GA 30642-3881	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) MR. JOE WALL	Date of Receipt MM / DD / YYYY 10 / 29 / 2010
	Mailing Address 4121 SOUTH FOUR MILE RUN DRIVE #401	Transaction ID: SA11.13959396
	City State Zip Code ARLINGTON VA 22204-3914	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation GOLDMAN SACHS ASSOCIATE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

SUBTOTAL of Receipts This Page (optional)	270.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2343 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. GELIA A. WALLACE

Mailing Address 367 CHARLESTON CT

City State Zip Code
MOBILE AL 36608-2434

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 29 / 2010

Transaction ID: SA11.13959103

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. HOWARD C. WALLACE

Mailing Address 3847 VIA MONDO

City State Zip Code
LOMPOC CA 93436-1617

FEC ID number of contributing federal political committee. **C**

Name of Employer
US AIR FORCE

Occupation

VIDEO CONFERENCE MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 18 / 2010

Transaction ID: SA11.13929581

Amount of Each Receipt this Period

60.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. GARY WALLER

Mailing Address 3073 FM 2602

City State Zip Code
VALLEY MILLS TX 76689-3461

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 18 / 2010

Transaction ID: SA11.13936896

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

310.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2344 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. SALVADOR B. WALLER

Mailing Address 29793 HILLARY AVE

City EASTON State MD Zip Code 21601-4893

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13937265
 Amount of Each Receipt this Period: 35.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
EMILY P. WALLING

Mailing Address P.O. BOX 415

City FORT SUMNER State NM Zip Code 88119-0415

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 11 / 18 / 2010
Transaction ID: SA11.13971359
 Amount of Each Receipt this Period: 50.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DOUGLAS C. WALLWAY

Mailing Address 15859 DONNER PASS RD

City TRUCKEE State CA Zip Code 96161

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED
Occupation OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 14 / 2010
Transaction ID: SA11.13918426
 Amount of Each Receipt this Period: 50.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 135.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2345 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DAVID H. WALSH

Mailing Address P.O. BOX 11450

City JACKSON State WY Zip Code 83002-1450

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3500.00

Date of Receipt: 11 / 04 / 2010
Transaction ID: SA11.13965200
Amount of Each Receipt this Period: 500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. KENNETH E. WALSH

Mailing Address 12 BITTERSWEET TRL

City WILTON State CT Zip Code 06897-3901

FEC ID number of contributing federal political committee. **C**

Name of Employer ELITE SALES & MARKETING Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13938460
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. KENNETH E. WALSH

Mailing Address 12 BITTERSWEET TRL

City WILTON State CT Zip Code 06897-3901

FEC ID number of contributing federal political committee. **C**

Name of Employer ELITE SALES & MARKETING Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 11 / 20 / 2010
Transaction ID: SA11.13971526
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 550.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2346 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. LORETTA WALSH

Mailing Address 210 LAKEWOOD DR

City State Zip Code
KERRVILLE TX 78028-6517

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951304

Amount of Each Receipt this Period 150.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RICHARD T. WALSH

Mailing Address 43 KNOB HILL RD

City State Zip Code
GLASTONBURY CT 06033-3708

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 246.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13954601

Amount of Each Receipt this Period 50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RICHARD T. WALSH

Mailing Address 43 KNOB HILL RD

City State Zip Code
GLASTONBURY CT 06033-3708

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 246.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957385

Amount of Each Receipt this Period 30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 230.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2347 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES O. WALTERS

Mailing Address 1802 FOX POINT CIRCLE

City State Zip Code
PORT BYRON IL 61275-9585

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	1	0

Transaction ID: SA11.13943596

Amount of Each Receipt this Period
150.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN L. WALTER

Mailing Address 104 FRONT STREET

City State Zip Code
CENTREVILLE MD 21617-2660

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	1	0

Transaction ID: SA11.13938484

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. JULIE WALTER

Mailing Address 1001 SW 5TH AVE STE 1200

City State Zip Code
PORTLAND OR 97204-1128

FEC ID number of contributing federal political committee. **C**

Name of Employer BEOVICH WALTER & FRIEND INC. Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	2	/	2	0	1	0

Transaction ID: SA11.13967724

Amount of Each Receipt this Period
300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **550.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2348 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MARTIN S. WALTEMYER

Mailing Address 567 RIVIERA DR.

City State Zip Code
WILLIAMSTOWN NJ 08094-3078

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 352.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13946664

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MARTIN S. WALTEMYER

Mailing Address 567 RIVIERA DR.

City State Zip Code
WILLIAMSTOWN NJ 08094-3078

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 352.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13971286

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LEONIE M. WALTHER

Mailing Address 15006 SW 127TH CIR PL N

City State Zip Code
MIAMI FL 33186-6344

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MIAMI-DADE PUBLIC LIBRARY SYSTEM LIBRARIAN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 480.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956002

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 100.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2349 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MICHAEL WALTHER	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 2441 BELLEVUE AVE	Transaction ID: SA11.13918898
	City State Zip Code DAYTONA BEACH FL 32114-5615	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation DMEAUTOMOTIVE MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

B.	Full Name (Last, First, Middle Initial) MRS. VIRGINIA WALTHER	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 6206 N KIRKWOOD AVE	Transaction ID: SA11.13956782
	City State Zip Code CHICAGO IL 60646-5026	Amount of Each Receipt this Period 275.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

C.	Full Name (Last, First, Middle Initial) MR. EUGENE F. WAMBOLD	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address PO BOX 510419	Transaction ID: SA11.13945356
	City State Zip Code KEY COLONY BEACH FL 33051-0419	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

SUBTOTAL of Receipts This Page (optional)	▶	625.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2350 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MARK A. WAMP

Mailing Address 2226 S PINEY POINT RD

City HOUSTON State TX Zip Code 77063-1439

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 31 / 2010
Transaction ID: SA11.13960690
 Amount of Each Receipt this Period 200.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KAREN S. WARD

Mailing Address P.O. BOX 65

City BATTIEST State OK Zip Code 74722-0065

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 218.00

Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13936899
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. MYRA B. WARD

Mailing Address 900 BROOKSIDE DRIVE

City ENID State OK Zip Code 73703-6941

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation OIL & GAS INVESTMENTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 10 / 15 / 2010
Transaction ID: SA11.13932329
 Amount of Each Receipt this Period 2500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 2800.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2351 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROGER C. WARD

Mailing Address 7474 NOEL ROAD

City State Zip Code
INDIANAPOLIS IN 46278-1516

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
HNTB CORP ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt M M / D D / Y Y Y Y
10 / 21 / 2010

Transaction ID: SA11.13945945

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. STEPHEN B. WARD

Mailing Address 1980 WASHINGTON ST
APT 803

City State Zip Code
SAN FRANCISCO CA 94109-2987

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
CARLES SCHWAB INVESTMENT MGR.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt M M / D D / Y Y Y Y
10 / 25 / 2010

Transaction ID: SA11.13947744

Amount of Each Receipt this Period
300.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. ARMANDA WARDE

Mailing Address 12 ELM PL

City State Zip Code
BERKELEY HTS NJ 07922-2305

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
CHRRCHILL FINANCE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt M M / D D / Y Y Y Y
10 / 26 / 2010

Transaction ID: SA11.13951467

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2352 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. DAVID WARLICK

Mailing Address 15 ABENAKI WAY

City State Zip Code
KENNEBUNKPORT ME 04046-5737

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
370.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 19 / 2010

Transaction ID: SA11.13931709

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. EDITH R. WARNER

Mailing Address 18 LINCOLN STREET

City State Zip Code
WEST HAVEN CT 06516-4817

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 18 / 2010

Transaction ID: SA11.13935720

Amount of Each Receipt this Period

40.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JOHN H. WARNER, JR.

Mailing Address P.O. BOX 2929

City State Zip Code
LA JOLLA CA 92038-2929

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 25 / 2010

Transaction ID: SA11.13952955

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

390.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2353 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ANTHONY G. WARREN

Mailing Address 100 NORTH BROADWAY
SUITE 3100

City State Zip Code
OKLAHOMA CITY OK 73102-8602

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ENERGY FINANCIAL OIL & GAS

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13928419

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
BETTY J. WARREN

Mailing Address 129 YOUNG DR

City State Zip Code
SMYRNA TN 37167-5306

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ALL 1 CONSTRUCTION INC GENERAL CONTRACTOR

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 205.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959258

Amount of Each Receipt this Period

45.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. MACK M. WARREN

Mailing Address 5028 BELLA TERRA DR.

City State Zip Code
VENICE FL 34293-6078

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929785

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

645.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2354 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. SIDNEY R. WARREN

Mailing Address 25 GROSVENOR RD.

City State Zip Code
BUFFALO NY 14223-1922

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 341.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13950069

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
REV. AUSTIN R. WARRINER

Mailing Address 23141 104TH ST

City State Zip Code
LIVE OAK FL 32060-5834

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 281.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13932038

Amount of Each Receipt this Period
20.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
REV. AUSTIN R. WARRINER

Mailing Address 23141 104TH ST

City State Zip Code
LIVE OAK FL 32060-5834

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 281.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13935034

Amount of Each Receipt this Period
35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 80.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2355 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MARK A. WASSERMAN

Mailing Address 14732 HUSTON ST

City State Zip Code
SHERMAN OAKS CA 91403-1643

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MITCHELL SILVERBURG & KNU-PP ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Transaction ID: SA11.13960675

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LOUIS J. WATEMBACH

Mailing Address 102 PINE UNIT RD.

City State Zip Code
WIBAUX MT 59353-9123

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ROGER TVED AND TRUCKING TRUCK DRIVER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959442

Amount of Each Receipt this Period
120.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ELMER WATERMAN

Mailing Address 4523 NW GREEN HILLS RD

City State Zip Code
TOPEKA KS 66618-5814

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928013

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **470.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2356 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GEORGE R. WATERMAN

Mailing Address 120 PEMBERTON PL.

City State Zip Code
HOPKINSVILLE KY 42240-9382

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 211.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933093

Amount of Each Receipt this Period
36.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RANDOLPH H. WATERFIELD

Mailing Address 48 AUBURN RD

City State Zip Code
LONG BCH TWP NJ 08008-7009

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930643

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RANDOLPH H. WATERFIELD

Mailing Address 48 AUBURN RD

City State Zip Code
LONG BCH TWP NJ 08008-7009

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13932425

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1236.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2357 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. ELAINE B. WATKINS

Mailing Address P.O. BOX 157

City State Zip Code
GUY AR 72061-0157

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943575

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. ELAINE B. WATKINS

Mailing Address P.O. BOX 157

City State Zip Code
GUY AR 72061-0157

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956616

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
FRANK WATKINS

Mailing Address P.O. BOX 1

City State Zip Code
ARVIN CA 93203-0001

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
256.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13971350

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **200.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2358 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MARGARET A. WATKINS

Mailing Address 213 JUDITH DR.

City State Zip Code
SUMMERVILLE SC 29485-8833

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13952458
Amount of Each Receipt this Period: 35.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. WALTER F. WATKINS

Mailing Address 1870 BRIDLE RIDGE TRCE

City State Zip Code
ROSWELL GA 30075-2151

FEC ID number of contributing federal political committee. **C**

Name of Employer APOLLO MD Occupation PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1745.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13942907
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. WALTER F. WATKINS

Mailing Address 1870 BRIDLE RIDGE TRCE

City State Zip Code
ROSWELL GA 30075-2151

FEC ID number of contributing federal political committee. **C**

Name of Employer APOLLO MD Occupation PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1745.00

Date of Receipt: 11 / 19 / 2010
Transaction ID: SA11.13972057
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 185.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2359 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. FRANK M. WATSON

Mailing Address 228 HAPPY HOLLOW RD.

City DOVER State TN Zip Code 37058-5722

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt: 10 / 27 / 2010
Transaction ID: SA11.13958478
Amount of Each Receipt this Period: 30.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
THE HONORA J. C. WATTS, JR.

Mailing Address 3512 ROSE CREST LANE

City FAIRFAX State VA Zip Code 22033-1636

FEC ID number of contributing federal political committee. **C**

Name of Employer J.C. WATTS CO. Occupation INVESTMENTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 11 / 03 / 2010
Transaction ID: SA11.13966026
Amount of Each Receipt this Period: 1500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT W. WAUGH

Mailing Address 626 E TAM OSHANTER DR

City PHOENIX State AZ Zip Code 85022-4219

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13950985
Amount of Each Receipt this Period: 70.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1600.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2360 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ROBERT W. WAUGH

Mailing Address 626 E TAM OSHANTER DR

City State Zip Code
PHOENIX AZ 85022-4219

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 401.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950988

Amount of Each Receipt this Period
1.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. JILL WAY

Mailing Address 3234 SW UPPER DRIVE

City State Zip Code
PORTLAND OR 97201-1771

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 644.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950131

Amount of Each Receipt this Period
235.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
ANNABELLE WAYMAN

Mailing Address 4057 CARLTON AVE

City State Zip Code
CENTRAL POINT OR 97502-1749

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 266.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936011

Amount of Each Receipt this Period
1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

237.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2361 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DOUGLAS S. WEART

Mailing Address 3201 MCHENRY DR

City State Zip Code
SAN ANTONIO TX 78239-3083

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 316.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13936820

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN J. WEATHERBY

Mailing Address 2301 WILLEYS LAKE RD.

City State Zip Code
CUSTER WA 98240-9715

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 361.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13933189

Amount of Each Receipt this Period
26.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. CAROL WEAVER

Mailing Address 13209 NW 8TH AVE. APT. D

City State Zip Code
VANCOUVER WA 98685-2539

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13931857

Amount of Each Receipt this Period
75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **141.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2362 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. R. SCOTT WEAVER

Mailing Address 546 MOREBORO ROAD

City State Zip Code
HATBORO PA 19040-3953

FEC ID number of contributing federal political committee. **C**

Name of Employer RELIANCE STANDARD LIFE INSURANCE Occupation IT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 1 0

Transaction ID: SA11.13928781

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
C. CLARK WEBB

Mailing Address 31 UNION SQUARE WEST

City State Zip Code
NEW YORK NY 10003-3203

FEC ID number of contributing federal political committee. **C**

Name of Employer SELECT EQUITY GROUP Occupation ANALYST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955961

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CLARK WEBB

Mailing Address 31 UNION SQUARE WEST

City State Zip Code
NEW YORK NY 10003-3203

FEC ID number of contributing federal political committee. **C**

Name of Employer SELECT EQUITY GROUP Occupation ANALYST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13932349

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **600.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2363 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. HARRY E. WEBB

Mailing Address 6225 BROOKSIDE BLVD

City State Zip Code
KANSAS CITY MO 64113

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt M M / D D / Y Y Y Y
10 / 18 / 2010

Transaction ID: SA11.13934804

Amount of Each Receipt this Period 300.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. KENNETH H. WEBB

Mailing Address 3061 CRATER DR.

City State Zip Code
LAKE HAVASU CITY AZ 86404-1487

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 317.00

Date of Receipt M M / D D / Y Y Y Y
10 / 21 / 2010

Transaction ID: SA11.13946772

Amount of Each Receipt this Period 51.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. KENNETH H. WEBB

Mailing Address 3061 CRATER DR.

City State Zip Code
LAKE HAVASU CITY AZ 86404-1487

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 317.00

Date of Receipt M M / D D / Y Y Y Y
11 / 02 / 2010

Transaction ID: SA11.13964874

Amount of Each Receipt this Period 90.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 441.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2364 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JON S. WEBBER

Mailing Address 1227 SOMERSET FIELD DR.

City State Zip Code
CHESTERFIELD MO 63005-1345

FEC ID number of contributing federal political committee. C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
206.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 18 / 2010

Transaction ID: SA11.13936037

Amount of Each Receipt this Period

6.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MILDRED WEBBER

Mailing Address 2908 45TH STREET, NW

City State Zip Code
WASHINGTON DC 20016-3559

FEC ID number of contributing federal political committee. C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 27 / 2010

Transaction ID: SA11.13957624

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. GLADYS A. WEBER

Mailing Address 204 E. SUSQUEHANNA AVE.

City State Zip Code
TOWSON MD 21286-5436

FEC ID number of contributing federal political committee. C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 15 / 2010

Transaction ID: SA11.13968952

Amount of Each Receipt this Period

20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

1026.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2365 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. GLADYS A. WEBER	Date of Receipt MM / DD / YYYY 11 / 17 / 2010
	Mailing Address 204 E. SUSQUEHANNA AVE.	Transaction ID: SA11.13969996
	City State Zip Code TOWSON MD 21286-5436	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

B.	Full Name (Last, First, Middle Initial) PAUL WEBER	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 308 GREENBRIAR LN.	Transaction ID: SA11.13934811
	City State Zip Code WEST GROVE PA 19390-9490	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) PAUL WEBER	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 308 GREENBRIAR LN.	Transaction ID: SA11.13954581
	City State Zip Code WEST GROVE PA 19390-9490	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)	▶	125.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2366 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. STANLEY J. WEBER

Mailing Address 3082 BOLGOS CIR

City ANN ARBOR State MI Zip Code 48105-1513

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 218.00

Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13941073
Amount of Each Receipt this Period 16.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JACK L. WEBSTER, III

Mailing Address 4026 BOWSER AVE APT 209
APARTMENT 209

City DALLAS State TX Zip Code 75219-3715

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 601.00

Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13939043
Amount of Each Receipt this Period 101.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN W. WEEKS

Mailing Address 595 CONCORD AVE

City BELMONT State MA Zip Code 02478-2025

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 256.00

Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13939275
Amount of Each Receipt this Period 100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 217.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2367 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RANDALL WEEKS

Mailing Address **4934 E 2ND AVENUE**

City **DENVER** State **CO** Zip Code **80220-6307**

FEC ID number of contributing federal political committee. **C**

Name of Employer **DAVIS GRAHAM & STUBBS** Occupation **ATTORNEY**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **10 / 18 / 2010**

Transaction ID: SA11.13937462

Amount of Each Receipt this Period **200.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GENE WEHKING

Mailing Address **9528 TRINADAD LN**

City **SAINT LOUIS** State **MO** Zip Code **63126-3144**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 20 / 2010**

Transaction ID: SA11.13938577

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ART WEHR

Mailing Address **2143 LAVENDER HILL CT**

City **LINCOLN** State **CA** Zip Code **95648-8721**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **521.00**

Date of Receipt **10 / 18 / 2010**

Transaction ID: SA11.13937290

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **400.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2368 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
EILEEN WEICHER
Mailing Address 537 N EUCLID AVE
City OAK PARK State IL Zip Code 60302-1617
FEC ID number of contributing federal political committee. **C**
Name of Employer HOMEMAKER Occupation HOMEMAKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00
Date of Receipt 10 / 21 / 2010
Transaction ID: SA11.13945281
Amount of Each Receipt this Period 250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. BEVERLY WEIDENDORF
Mailing Address 22792 MAYFIELD STREET
City FARMINGTON State MI Zip Code 48336-3959
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.00
Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13941774
Amount of Each Receipt this Period 2000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. LARRY WEIDIG
Mailing Address 3819 S 18TH. ST.
City SHEBOYGAN State WI Zip Code 53081-7111
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 10 / 14 / 2010
Transaction ID: SA11.13928547
Amount of Each Receipt this Period 25.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 2275.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2369 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ENEZ WEILER

Mailing Address 10015 W ROYAL OAK RD APT 24

City State Zip Code
SUN CITY AZ 85351-3164

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 211.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934297

Amount of Each Receipt this Period
41.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ENEZ WEILER

Mailing Address 10015 W ROYAL OAK RD APT 24

City State Zip Code
SUN CITY AZ 85351-3164

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 211.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935527

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT D. WEINBERG

Mailing Address 3565 85TH ST
APARTMENT 1F

City State Zip Code
JACKSON HTS NY 11372-5553

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948888

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **141.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2370 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT D. WEINBERG

Mailing Address 3565 85TH ST
APARTMENT 1F

City JACKSON HTS State NY Zip Code 11372-5553

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt MM / DD / YYYY
10 / 28 / 2010

Transaction ID: SA11.13957686

Amount of Each Receipt this Period 80.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN WEINHOLTZ

Mailing Address 401 9TH STREET, NW
SUITE 900

City WASHINGTON State DC Zip Code 20004-2145

FEC ID number of contributing federal political committee. **C**

Name of Employer NIXON & PEABODY Occupation ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY
11 / 10 / 2010

Transaction ID: SA11.13968689

Amount of Each Receipt this Period 250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. JOANNE F. WEINOE

Mailing Address 9301 LAUREL CANYON BLVD

City ARLETA State CA Zip Code 91331-4315

FEC ID number of contributing federal political committee. **C**

Name of Employer GOLDEN STATE MAGNETIC INC. Occupation PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13947812

Amount of Each Receipt this Period 250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 580.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2371 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DAVID C. WEINSTEIN

Mailing Address 158 COTTON STREET

City State Zip Code
NEWTON MA 02458-2641

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13959328

Amount of Each Receipt this Period
15000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RICHARD WEIS

Mailing Address 8237 RIDGEWAY AVE

City State Zip Code
SKOKIE IL 60076-3319

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WALGREENS COMPANY GROCERY MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 1 0

Transaction ID: SA11.13966275

Amount of Each Receipt this Period
400.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. LAVERNE WEISKOPF

Mailing Address 1705 MADISON AVE

City State Zip Code
WASHINGTON MO 63090-4921

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13961073

Amount of Each Receipt this Period
75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 15475.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2372 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DENNIS WEISSING

Mailing Address 12401 N 22ND STREET
APT. C107

City Tampa State FL Zip Code 33612-4696

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt 10 / 26 / 2010
Transaction ID: SA11.13957105
Amount of Each Receipt this Period 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DENNIS WEISSING

Mailing Address 12401 N 22ND STREET
APT. C107

City Tampa State FL Zip Code 33612-4696

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt 11 / 05 / 2010
Transaction ID: SA11.13966395
Amount of Each Receipt this Period 60.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DENNIS WEISSING

Mailing Address 12401 N 22ND STREET
APT. C107

City Tampa State FL Zip Code 33612-4696

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt 11 / 18 / 2010
Transaction ID: SA11.13971444
Amount of Each Receipt this Period 60.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 170.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2373 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MARK G. WEISSHAAR

Mailing Address 9112 ALTON PARKWAY

City State Zip Code
SILVER SPRING MD 20910-1635

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	1	0

Transaction ID: SA11.13945243

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MARK G. WEISSHAAR

Mailing Address 9112 ALTON PARKWAY

City State Zip Code
SILVER SPRING MD 20910-1635

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11.13957950

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MARK S. WEISSENFELS

Mailing Address 910 TAFT AVE

City State Zip Code
EAU CLAIRE WI 54701-6549

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	1	0

Transaction ID: SA11.13931755

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **2050.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2374 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. MELITTA WEISS	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 2185 GUTHRIE DR	Transaction ID: SA11.13930198
	City State Zip Code LOS ANGELES CA 90034-1056	Amount of Each Receipt this Period 26.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.00	

B.	Full Name (Last, First, Middle Initial) PAULA WEISS	Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address 8918 ELKINS PARK DR	Transaction ID: SA11.13963766
	City State Zip Code MATTHEWS NC 28105-7453	Amount of Each Receipt this Period 55.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation HILLDRUP UNITED VAN LINES MOVING SALES CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

C.	Full Name (Last, First, Middle Initial) DR. CLAIRE WEITZ	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 1810 BY WOODS LN.	Transaction ID: SA11.13928866
	City State Zip Code STEVENSON MD 21153-0630	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

SUBTOTAL of Receipts This Page (optional)	156.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2375 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. JOHN WEITZEL	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 1960 LUCILLE LN.	Transaction ID: SA11.13958477
	City State Zip Code SAINT CLOUD MN 56303-0434	Amount of Each Receipt this Period 240.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 720.00	

B.	Full Name (Last, First, Middle Initial) MRS. LINDA S. WELCH	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 210 SAND KEY ESTATES DRIV	Transaction ID: SA11.13933229
	City State Zip Code CLEARWATER BEACH FL 33767-2958	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SELF-EMPLOYED SELF-EMPLOYED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) MS. MARGARET WELCH	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 5802 N 5TH AVE	Transaction ID: SA11.13956048
	City State Zip Code PHOENIX AZ 85013-1539	Amount of Each Receipt this Period 1.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation JOKAKE CONSTRUCTION MARKETING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 231.00	

SUBTOTAL of Receipts This Page (optional)	▶	441.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2376 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. MARGARET WELCH	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 1 0
	Mailing Address 5802 N 5TH AVE	Transaction ID: SA11.13957269
	City State Zip Code PHOENIX AZ 85013-1539	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation JOKAKE CONSTRUCTION MARKETING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 231.00	

B.	Full Name (Last, First, Middle Initial) MR. PHILIP WELCH	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 1 0
	Mailing Address 278 LAKE RD.	Transaction ID: SA11.13944011
	City State Zip Code MILTON VT 05468-4117	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.00	

C.	Full Name (Last, First, Middle Initial) MR. PHILIP WELCH	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	Mailing Address 278 LAKE RD.	Transaction ID: SA11.13953175
	City State Zip Code MILTON VT 05468-4117	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.00	

SUBTOTAL of Receipts This Page (optional)	▶	55.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2377 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. PHILIP WELCH

Mailing Address 278 LAKE RD.

City Milton State VT Zip Code 05468-4117

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 461.00

Date of Receipt MM / DD / YYYY
11 / 18 / 2010

Transaction ID: SA11.13971310

Amount of Each Receipt this Period 15.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BETTY WELLBORN

Mailing Address 1429 RIDGEVIEW RD.

City CRAGFORD State AL Zip Code 36255-6423

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13942464

Amount of Each Receipt this Period 2500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. TIM WELLBORN

Mailing Address 101 RUSSWOOD

City ALEXANDER CITY State AL Zip Code 35010-2601

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13942471

Amount of Each Receipt this Period 2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 5015.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2378 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES WELLER

Mailing Address 401 9TH STREET, NW
SUITE 900

City State Zip Code
WASHINGTON DC 20004-2145

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NIXON & PEABODY ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 11 / 10 / 2010
Transaction ID: SA11.13968692
Amount of Each Receipt this Period: 250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN C. WELLEMEYER

Mailing Address 89 ROSEDALE RD

City State Zip Code
PRINCETON NJ 08540-6701

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2801.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13936931
Amount of Each Receipt this Period: 750.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. T C. WELLER, JR.

Mailing Address 8054 MCGOWIN DR

City State Zip Code
FAIRHOPE AL 36532-5542

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 640.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13952481
Amount of Each Receipt this Period: 320.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1320.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2379 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ARMISTEAD L. WELLFORD

Mailing Address 8955 BELLEFONTE RD

City State Zip Code
HENRICO VA 23229-7150

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13952898

Amount of Each Receipt this Period
75.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. DABNEY S. WELLFORD

Mailing Address 7488 DEXTER ROAD

City State Zip Code
CORDOVA TN 38016-5740

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
301.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 1 0

Transaction ID: SA11.13966213

Amount of Each Receipt this Period
201.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. VICTORIA B. WELLINGTON

Mailing Address 157 SPRING VALLEY DRIVE

City State Zip Code
GRANVILLE OH 43023-1253

FEC ID number of contributing federal political committee. **C**

Name of Employer CENTRAL OHIO TECH COLLEGE
Occupation NURSE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 1 0

Transaction ID: SA11.13965807

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **301.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2380 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. ALICE M. WELLS

Mailing Address 14220 ANNS CHOICE WAY

City State Zip Code
WARMINSTER PA 18974-3330

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13964313

Amount of Each Receipt this Period
35.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. JACQUELYN WELLS

Mailing Address 2320 CENTRAL ST APT 204

City State Zip Code
EVANSTON IL 60201-1414

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13945450

Amount of Each Receipt this Period
85.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. JESSIE K. WELLS

Mailing Address 296 CANTERBURY RD

City State Zip Code
BEL AIR MD 21014-9024

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1270.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13948576

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **220.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2381 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. JESSIE K. WELLS

Mailing Address 296 CANTERBURY RD

City	State	Zip Code
BEL AIR	MD	21014-9024

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER	Occupation HOMEMAKER
-------------------------------	-------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1270.00
---	-------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948916

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. JESSIE K. WELLS

Mailing Address 296 CANTERBURY RD

City	State	Zip Code
BEL AIR	MD	21014-9024

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER	Occupation HOMEMAKER
-------------------------------	-------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1270.00
---	-------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955291

Amount of Each Receipt this Period

30.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. JESSIE K. WELLS

Mailing Address 296 CANTERBURY RD

City	State	Zip Code
BEL AIR	MD	21014-9024

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER	Occupation HOMEMAKER
-------------------------------	-------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1270.00
---	-------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13971221

Amount of Each Receipt this Period

20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2382 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. JESSIE K. WELLS	Date of Receipt MM / DD / YYYY 11 / 18 / 2010
	Mailing Address 296 CANTERBURY RD	Transaction ID: SA11.13971222
	City State Zip Code BEL AIR MD 21014-9024	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation HOMEMAKER HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1270.00	

B.	Full Name (Last, First, Middle Initial) MRS. JESSIE K. WELLS	Date of Receipt MM / DD / YYYY 11 / 18 / 2010
	Mailing Address 296 CANTERBURY RD	Transaction ID: SA11.13971389
	City State Zip Code BEL AIR MD 21014-9024	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation HOMEMAKER HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1270.00	

C.	Full Name (Last, First, Middle Initial) MS. JOAN WELLS	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 1840 N PROSPECT AVE APT 1011	Transaction ID: SA11.13931573
	City State Zip Code MILWAUKEE WI 53202-1965	Amount of Each Receipt this Period 155.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SELF-EMPLOYED ARTIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00	

SUBTOTAL of Receipts This Page (optional)	305.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2383 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. NORMA J. WELLS

Mailing Address 16 SPRINGER DR

City State Zip Code
COLUMBIA MO 65201-5425

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928086

Amount of Each Receipt this Period

60.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. LOIS L. WENDL

Mailing Address 46 THISTLEDOWN DR.

City State Zip Code
ROCHESTER NY 14617-3019

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 215.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928882

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. STEVEN I. WENGERD

Mailing Address 400 LINDEN LN.

City State Zip Code
BELLEVILLE PA 17004-9089

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 341.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941698

Amount of Each Receipt this Period

101.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

186.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2384 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ROBERT C. WEPPLER

Mailing Address 6747 LARCHMONT DR

City State Zip Code
MAYFIELD HTS OH 44124-3638

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ROCKWELL AUTOMATION ENGINEER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959080

Amount of Each Receipt this Period
75.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ROBERT F. WERLY

Mailing Address 3832 CARTER RD.

City State Zip Code
BETHLEHEM PA 18020-3471

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LEHIGH HEAVY FOUSL MANAGER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 235.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935727

Amount of Each Receipt this Period
40.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DARRYL J. WERNER

Mailing Address 720 N TUSTIN AVE #100

City State Zip Code
SANTA ANA CA 92705-3606

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 290.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945637

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

215.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2385 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. JESSE WERNER, JR.	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 26 TURNBERRY PLACE	Transaction ID: SA11.13937436
	City State Zip Code SPRINGFIELD IL 62704-3173	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer CHAMPION GAS & OIL COMPANY	Occupation PROPANE GASOLINE & OIL BUSINE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

B.	Full Name (Last, First, Middle Initial) MRS. PATRICIA WERTZ	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 62238 CARLTON DR	Transaction ID: SA11.13946503
	City State Zip Code CASSOPOLIS MI 49031-9377	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer JW WERTZ	Occupation SELF-EMPLOYED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

C.	Full Name (Last, First, Middle Initial) MRS. PATRICIA WERTZ	Date of Receipt MM / DD / YYYY 11 / 22 / 2010
	Mailing Address 62238 CARLTON DR	Transaction ID: SA11.13972759
	City State Zip Code CASSOPOLIS MI 49031-9377	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer JW WERTZ	Occupation SELF-EMPLOYED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional)	▶	200.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2386 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. EDITH W. WERTHER

Mailing Address 8339 VINTAGE CLUB CIR

City State Zip Code
WILMINGTON NC 28411-7690

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937916

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. PATRICIA A. WESLEY

Mailing Address 4155 SENNA DRIVE

City State Zip Code
LAS CRUCES NM 88011-7632

FEC ID number of contributing federal political committee. **C**

Name of Employer DEPT OF DEFENSE
Occupation ORSA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935472

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. MICHELE M. WESONIG

Mailing Address 14757 BEVERLY ST

City State Zip Code
OVERLAND PARK KS 66223-2933

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955100

Amount of Each Receipt this Period
150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **250.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2387 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. BARBARA WEST

Mailing Address 2500 INDIGO LN
UNIT 215

City GLENVIEW State IL Zip Code 60026-8302

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935332

Amount of Each Receipt this Period
150.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAVID G. WEST

Mailing Address 2 LAKEWOOD DRIVE

City MCLLOUD State OK Zip Code 74851-8539

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
276.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937218

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID G. WEST

Mailing Address 2 LAKEWOOD DRIVE

City MCLLOUD State OK Zip Code 74851-8539

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
276.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 5 / 2 0 1 0

Transaction ID: SA11.13968791

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **200.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2388 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. DAVID G. WEST	Date of Receipt MM / DD / YYYY 11 / 15 / 2010
	Mailing Address 2 LAKEWOOD DRIVE	Transaction ID: SA11.13968809
	City State Zip Code MCLLOUD OK 74851-8539	Amount of Each Receipt this Period 1.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 276.00	

B.	Full Name (Last, First, Middle Initial) MS. HELEN L. WEST	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 200 PATTERSON AVE APT 118	Transaction ID: SA11.13964435
	City State Zip Code SAN ANTONIO TX 78209-6264	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

C.	Full Name (Last, First, Middle Initial) JOHN WEST	Date of Receipt MM / DD / YYYY 11 / 02 / 2010
	Mailing Address 5 EGRET ROAD	Transaction ID: SA11.13962516
	City State Zip Code MYSTIC CT 06355-3295	Amount of Each Receipt this Period 160.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SEAPORT DERMATOLOGY DERMATOLOGIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00	

SUBTOTAL of Receipts This Page (optional)	311.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2389 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. MARK WEST

Mailing Address 3330 CUMBERLAND BLVD

City ATLANTA State GA Zip Code 30339-5995

FEC ID number of contributing federal political committee. **C**

Name of Employer FIRST BEACON INVESTMENTS Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt MM / DD / YYYY
10 / 14 / 2010

Transaction ID: SA11.13918857

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. DANIEL J. WESTERBECK

Mailing Address 24 SURF SCOTER RD

City HILTON HEAD ISLAND State SC Zip Code 29928-5610

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation INVESTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1400.00

Date of Receipt MM / DD / YYYY
10 / 16 / 2010

Transaction ID: SA11.13928710

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. DANIEL J. WESTERBECK

Mailing Address 24 SURF SCOTER RD

City HILTON HEAD ISLAND State SC Zip Code 29928-5610

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation INVESTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1400.00

Date of Receipt MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13939016

Amount of Each Receipt this Period
300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 6300.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2390 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. PAUL G. WESTHOFF	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 667 BERRYWINE LN	Transaction ID: SA11.13939057
	City State Zip Code ARNOLD MO 63010-4735	Amount of Each Receipt this Period 51.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 346.00	

B.	Full Name (Last, First, Middle Initial) LEZLEE HIEGEL WESTINE	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 7108 THRASHER ROAD	Transaction ID: SA11.13942510
	City State Zip Code MCLEAN VA 22101-2013	Amount of Each Receipt this Period 1500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

C.	Full Name (Last, First, Middle Initial) MR. BILL WESTLAKE	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 38 LONGACRE DR.	Transaction ID: SA11.13955875
	City State Zip Code COLLEGEVILLE PA 19426-3811	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer WESTLAKE PHARMACEUTICAL SERVICES, INC.	Occupation FIELD SERVICE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00	

SUBTOTAL of Receipts This Page (optional)	▶	1651.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2391 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. MURRAY WESTREICH

Mailing Address 4760 BOCAIRE BLVD

City State Zip Code
BOCA RATON FL 33487-1158

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13954087

Amount of Each Receipt this Period
150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DR. ALBERT R C WESTWOOD

Mailing Address 13539 CANADA DEL OSO PL NE

City State Zip Code
ALBUQUERQUE NM 87111-8045

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
211.00

Date of Receipt
MM / DD / YYYY
11 / 22 / 2010

Transaction ID: SA11.13971853

Amount of Each Receipt this Period
60.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. FRANK P. WETHERBEE

Mailing Address P.O. BOX 3650

City State Zip Code
ALBANY GA 31706-3650

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED
Occupation FARMER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2010

Transaction ID: SA11.13951348

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **410.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2392 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. ERICA WETMORE

Mailing Address 1703 BEACON COVE COURT

City State Zip Code
KATY TX 77450-5048

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Transaction ID: SA11.13968226

Amount of Each Receipt this Period
150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DR. HENRI WETSELAAR, M.D.

Mailing Address 3681 FORESTCREST DRIVE

City State Zip Code
LAS VEGAS NV 89121-4954

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NEW AMSTERDAM MEDICAL GRO-UP PHYSICIAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 24375.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13947809

Amount of Each Receipt this Period
300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DR. HENRI WETSELAAR, M.D.

Mailing Address 3681 FORESTCREST DRIVE

City State Zip Code
LAS VEGAS NV 89121-4954

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NEW AMSTERDAM MEDICAL GRO-UP PHYSICIAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 24375.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13965480

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2450.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2393 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. ROAN H. WETSTONE

Mailing Address 77 KENWOOD CIR.

City BLOOMFIELD State CT Zip Code 06002-3435

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 248.00

Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13948308
Amount of Each Receipt this Period 61.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. ROAN H. WETSTONE

Mailing Address 77 KENWOOD CIR.

City BLOOMFIELD State CT Zip Code 06002-3435

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 248.00

Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13949919
Amount of Each Receipt this Period 20.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOSEPH WETZEL

Mailing Address 6426 RIGGS PL

City LOS ANGELES State CA Zip Code 90045-1242

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt 10 / 15 / 2010
Transaction ID: SA11.13931252
Amount of Each Receipt this Period 25.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 106.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2394 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. RICHARD WETZEL

Mailing Address 3029 PHEASANT DR

City State Zip Code
LANCASTER PA 17601-1423

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 370.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955107

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. PHYLUS K. WETZLER

Mailing Address 3011 51ST ST W

City State Zip Code
BRADENTON FL 34209-6153

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930668

Amount of Each Receipt this Period

600.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. LESLIE H. WEXNER

Mailing Address 3 LIMITED PARKWAY

City State Zip Code
COLUMBUS OH 43230-1467

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LIMITED BRANDS CHAIRMAN & C. E. O.

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 20000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13945234

Amount of Each Receipt this Period

15000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

15710.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2395 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. VICKI WEYHRICH	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 1200 PLEASANT LANE	Transaction ID: SA11.13953582
	City State Zip Code GLENVIEW IL 60025-1959	Amount of Each Receipt this Period 101.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	

B.	Full Name (Last, First, Middle Initial) JOHN E. WHALEN	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 1100 SARANAC LN	Transaction ID: SA11.13941639
	City State Zip Code NORTHBROOK IL 60062-4433	Amount of Each Receipt this Period 51.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

C.	Full Name (Last, First, Middle Initial) MR. THOMAS E. WHATLEY	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 27690 MARINA ISLE CT	Transaction ID: SA11.13953583
	City State Zip Code BONITA SPRINGS FL 34134-6700	Amount of Each Receipt this Period 101.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

SUBTOTAL of Receipts This Page (optional)	253.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2396 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. BRUCE A. WHEATLEY		Date of Receipt
	Mailing Address 53797 220TH AVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 02 / 2010
	City	State	Zip Code
	POCAHONTAS	IA	50574-8704
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13962717
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 310.00	<input type="text"/> 100.00 CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) WILLIAM WHEATON		Date of Receipt
	Mailing Address 4977 BATTERY LANE #701		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 02 / 2010
	City	State	Zip Code
	BETHESDA	MD	20814-4928
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13962743
Name of Employer HANGER		Occupation PROGRAMMER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 220.00	<input type="text"/> 25.00 CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MR. JIMMY WHEE		Date of Receipt
	Mailing Address #3 HERITAGE HILL CIRCLE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 28 / 2010
	City	State	Zip Code
	THE WOODLANDS	TX	77381-1405
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13958238
Name of Employer SELF-EMPLOYED		Occupation PHYSICIAN	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 5000.00	<input type="text"/> 5000.00 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 5125.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2397 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. CAROL WHEELER

Mailing Address 18925 AUTUMN WAY

City State Zip Code
MONUMENT CO 80132-9017

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 376.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953605

Amount of Each Receipt this Period
226.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAVID L. WHEELER

Mailing Address 4005 WILD FLOWER DR

City State Zip Code
RAPID CITY SD 57701-2120

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
U.S.D.A. FOREST SERVICE RESEARCH LIAISON

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929008

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. PATRICIA W. WHEELER

Mailing Address 4033 S. YORKTOWN PLACE

City State Zip Code
TULSA OK 74105-3412

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13948195

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 776.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2398 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. THOMAS B. WHEELER

Mailing Address 736 KINGS TOWN DRIVE

City State Zip Code
NAPLES FL 34102-7831

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 602.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934969

Amount of Each Receipt this Period
2.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WARREN WHEELER

Mailing Address 1131 TIMOTHY RD

City State Zip Code
GREENSBORO GA 30642-3950

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SCHREEDER WHEELER & FUNK L.L.P. INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956743

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. MARGO WHELAN

Mailing Address 2202 EAST 70TH STREET

City State Zip Code
BROOKLYN NY 11234-6506

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NYCHHC REGISTERED NURSE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 1 0

Transaction ID: SA11.13960689

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **302.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2399 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
COL. ALLIE WHITE

Mailing Address 20550 HUEBNER RD UNIT 209

City State Zip Code
SAN ANTONIO TX 78258-3967

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 885.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2010

Transaction ID: SA11.13951370

Amount of Each Receipt this Period
110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DENNIS L. WHITE

Mailing Address 8511 INWOOD RD.

City State Zip Code
DALLAS TX 75209-3345

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED INVESTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 393.00

Date of Receipt
MM / DD / YYYY
11 / 08 / 2010

Transaction ID: SA11.13966724

Amount of Each Receipt this Period
80.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. GARY WHITE

Mailing Address 2101 TREASURE HILLS BLVD. APT.

City State Zip Code
HARLINGEN TX 78550-8735

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13934061

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **240.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2400 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GLENN D. WHITEMAN

Mailing Address 11911 HAMPSTEAD GREEN

City State Zip Code
ELLICOTT CITY MD 21042-7110

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13969218

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JEFFREY A. WHITEMAN

Mailing Address 520 11TH AVENUE SOUTH

City State Zip Code
NAPLES FL 34102-7134

FEC ID number of contributing federal political committee. **C**

Name of Employer CONSULTANT Occupation SELF-EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13957618

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. JOHN PHILIP WHITECAR, JR.

Mailing Address 31 MEGAN LN.

City State Zip Code
COLUMBUS MS 39705-3195

FEC ID number of contributing federal political committee. **C**

Name of Employer COLUMBUS HENATOLOGY ONCOLOGY PA Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940876

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 400.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2401 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. LAWRENCE E. WHITE	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 6 SUGARLOAF LANE	Transaction ID: SA11.13942921
	City State Zip Code BRENTWOOD TN 37027-8967	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00	

B.	Full Name (Last, First, Middle Initial) MS. LOIS I. WHITEHEAD	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 5382 LAURELTON AVE	Transaction ID: SA11.13959602
	City State Zip Code GARDEN GROVE CA 92845-1536	Amount of Each Receipt this Period 85.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer HOMEMAKER	Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 317.00	

C.	Full Name (Last, First, Middle Initial) MS. LOIS I. WHITEHEAD	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 5382 LAURELTON AVE	Transaction ID: SA11.13960019
	City State Zip Code GARDEN GROVE CA 92845-1536	Amount of Each Receipt this Period 2.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer HOMEMAKER	Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 317.00	

SUBTOTAL of Receipts This Page (optional)	587.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2402 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. LORENA A. WHITE

Mailing Address 215 N WALTERS ST

City ROBINSON State IL Zip Code 62454-1325

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 11 / 01 / 2010
Transaction ID: SA11.13960840
 Amount of Each Receipt this Period: 55.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LOUIS WHITE

Mailing Address 418 E LAWN CIR

City ODESSA State MO Zip Code 64076-1489

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 396.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13949378
 Amount of Each Receipt this Period: 30.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. LOUIS WHITE

Mailing Address 418 E LAWN CIR

City ODESSA State MO Zip Code 64076-1489

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 396.00

Date of Receipt: 11 / 01 / 2010
Transaction ID: SA11.13963746
 Amount of Each Receipt this Period: 35.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 120.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2403 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. LYNN WHITE	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 212 CALUMET DR	Transaction ID: SA11.13935289
	City State Zip Code MADISON MS 39110-8685	Amount of Each Receipt this Period 1.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation PPR2 BOOKKEEPER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.00	

B.	Full Name (Last, First, Middle Initial) R. WHITE	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 505 WITCHES ROCK RD	Transaction ID: SA11.13953732
	City State Zip Code BRISTOL CT 06010-7152	Amount of Each Receipt this Period 120.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

C.	Full Name (Last, First, Middle Initial) MS. SANDRA S. WHITE	Date of Receipt MM / DD / YYYY 11 / 16 / 2010
	Mailing Address 38 EAGLE CREEK DR.	Transaction ID: SA11.13969327
	City State Zip Code NORWALK OH 44857-8852	Amount of Each Receipt this Period 180.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

SUBTOTAL of Receipts This Page (optional)	▶	301.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2404 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. WENDELL A. WHITE	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 3437 CHANDLER CREEK RD STE 104	Transaction ID: SA11.13934839
	City State Zip Code VIRGINIA BEACH VA 23453-2977	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SELF-EMPLOYED BUILDER/DEVELOPER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

B.	Full Name (Last, First, Middle Initial) DR. JAMES R. WHITMAN	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 686 NORTON ST	Transaction ID: SA11.13956714
	City State Zip Code LONGBOAT KEY FL 34228-1446	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SELF-EMPLOYED PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

C.	Full Name (Last, First, Middle Initial) MR. JERRY L. WHITMER	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 7068 GREEN HILL RD	Transaction ID: SA11.13931858
	City State Zip Code LINVILLE VA 22834-2506	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional)	600.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2405 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. EDWIN J. WHITNEY

Mailing Address 9303 MONTESSORI DR

City State Zip Code
SAN ANTONIO TX 78217-3417

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13935526

Amount of Each Receipt this Period
100.00

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS

Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LINDA B. WHITNEY

Mailing Address 102 N TOWNE AVE

City State Zip Code
ELMWOOD IL 61529-9541

Date of Receipt
MM / DD / YYYY
10 / 28 / 2010

Transaction ID: SA11.13960112

Amount of Each Receipt this Period
501.00

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS

Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
501.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RON WHITTINGTON

Mailing Address 953 MEADOW LN

City State Zip Code
KINGSPORT TN 37663-2855

Date of Receipt
MM / DD / YYYY
10 / 29 / 2010

Transaction ID: SA11.13961342

Amount of Each Receipt this Period
20.00

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS

Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **621.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2406 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WAYNE WHITTAKER

Mailing Address 7365 MERCHANT COURT
SUITE 2

City State Zip Code
SARASOTA FL 34240-8446

FEC ID number of contributing federal political committee. **C**

Name of Employer IQC INC Occupation MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 11 / 03 / 2010
Transaction ID: SA11.13964469
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MARIE S. WHYTE

Mailing Address 12702 POPLAR ST.

City State Zip Code
GARDEN GROVE CA 92845-2818

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 11 / 19 / 2010
Transaction ID: SA11.13972048
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. STAN WIDGER

Mailing Address 401 9TH STREET N.W.
SUITE 900

City State Zip Code
WASHINGTON DC 20004-2145

FEC ID number of contributing federal political committee. **C**

Name of Employer NIXON PEABODY Occupation ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 11 / 10 / 2010
Transaction ID: SA11.13968709
Amount of Each Receipt this Period: 250.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 450.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2407 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ROBERT A. WIEBEL

Mailing Address 3350 POSEIDON WAY

City State Zip Code
INDIALANTIC FL 32903-1838

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 261.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930210

Amount of Each Receipt this Period
51.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. JADWIGA WIECKOWSKI

Mailing Address 146 S 3RD ST

City State Zip Code
BROOKLYN NY 11211-5510

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 701.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934045

Amount of Each Receipt this Period
150.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. JADWIGA WIECKOWSKI

Mailing Address 146 S 3RD ST

City State Zip Code
BROOKLYN NY 11211-5510

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 701.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948559

Amount of Each Receipt this Period
151.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **352.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2408 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. JADWIGA WIECKOWSKI

Mailing Address 146 S 3RD ST

City State Zip Code
BROOKLYN NY 11211-5510

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 701.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956703

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ALAN S. WIEL

Mailing Address 35 FENTON ST. APT. 230

City State Zip Code
LIVERMORE CA 94550-4180

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956740

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. DARLA WIELKIEWICZ

Mailing Address 2286 WESTWOOD PINE DR

City State Zip Code
MOSELEY VA 23120-1157

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13953907

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 450.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2409 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. DARLA WIELKIEWICZ		Date of Receipt MM / DD / YYYY 11 / 04 / 2010		
	Mailing Address 2286 WESTWOOD PINE DR		Transaction ID: SA11.13965964		
	City MOSELEY	State VA	Zip Code 23120-1157	Amount of Each Receipt this Period 35.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
	Name of Employer RETIRED	Occupation RETIRED	Aggregate Year-to-Date 235.00		

B.	Full Name (Last, First, Middle Initial) MR. JEFFREY L. WIGGALL		Date of Receipt MM / DD / YYYY 10 / 28 / 2010		
	Mailing Address 17493 SCHALIT WAY		Transaction ID: SA11.13960324		
	City LAKE OSWEGO	State OR	Zip Code 97035-5435	Amount of Each Receipt this Period 35.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	Aggregate Year-to-Date 245.00		

C.	Full Name (Last, First, Middle Initial) ELIZABETH R. WIGGINTON		Date of Receipt MM / DD / YYYY 10 / 25 / 2010		
	Mailing Address 21605 WHITES NECK RD.		Transaction ID: SA11.13955278		
	City BUSHWOOD	State MD	Zip Code 20618-2326	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
	Name of Employer RETIRED	Occupation RETIRED	Aggregate Year-to-Date 220.00		

SUBTOTAL of Receipts This Page (optional)	▶	120.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2410 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JIM WIGGINS

Mailing Address 2072 TREMONT ROAD

City State Zip Code
COLUMBUS OH 43221-4239

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PHRONESIS PARTNERS, L.P. PORTFOLIO MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13938457

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILLIAM H. WIGGINS

Mailing Address 304 N HARRIS ST.

City State Zip Code
SANDERSVILLE GA 31082-1733

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13964194

Amount of Each Receipt this Period
60.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
W. R. WIGLEY, JR.

Mailing Address 5528 MEADERS LN.

City State Zip Code
DALLAS TX 75229-6652

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 470.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930384

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **5160.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2411 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
W. R. WIGLEY, JR.
Mailing Address 5528 MEADERS LN.
City DALLAS State TX Zip Code 75229-6652
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 470.00
Date of Receipt 11 / 01 / 2010
Transaction ID: SA11.13963112
Amount of Each Receipt this Period 80.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. CHARLES W. WIKLE
Mailing Address 1043 S MADISON ST
City TUPELO State MS Zip Code 38801-6309
FEC ID number of contributing federal political committee. **C**
Name of Employer NORTH MISSISSIPPI ORAL SURG. A Occupation PRESIDENT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 351.00
Date of Receipt 10 / 25 / 2010
Transaction ID: SA11.13952331
Amount of Each Receipt this Period 101.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
TODD WILBER
Mailing Address 8667 RUPP FARM
City WEST CHESTER State OH Zip Code 45069-4528
FEC ID number of contributing federal political committee. **C**
Name of Employer CTI RESTAURANTS Occupation SMALL BUSINESS OWNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13945598
Amount of Each Receipt this Period 500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 681.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2413 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
KENNETH ALFRED WILDE

Mailing Address 3604 LAUREL LEDGE LN.

City State Zip Code
AUSTIN TX 78731-4048

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956268

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. RITA WILES

Mailing Address 1149 N COUNTY ROAD 22

City State Zip Code
MARIENTHAL KS 67863-6349

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13960632

Amount of Each Receipt this Period
115.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. J. S. WILKENFELD

Mailing Address PO BOX 690685

City State Zip Code
HOUSTON TX 77269-0685

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955968

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **5215.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2414 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. SHIRLEY B. WILKES

Mailing Address 3209 TROGDAN DR.

City FAYETTEVILLE State NC Zip Code 28306-8335

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt: 11 / 08 / 2010
Transaction ID: SA11.13966617
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. ELINOR WILKINSON

Mailing Address 6325 CREEKBEND DR.

City HOUSTON State TX Zip Code 77096-5622

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 660.00

Date of Receipt: 10 / 21 / 2010
Transaction ID: SA11.13947124
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JEFF WILKIN

Mailing Address 13255 W 86TH DR

City ARVADA State CO Zip Code 80005-5846

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation DENTIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 27 / 2010
Transaction ID: SA11.13955876
Amount of Each Receipt this Period: 110.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 235.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2415 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. JILL P. WILKINSON

Mailing Address 690 KIMBERLY ST.

City State Zip Code
BIRMINGHAM MI 48009-1117

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED WRITER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 355.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945393

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LYNN WILKINS

Mailing Address 715 HOLLY DR

City State Zip Code
FAIRHOPE AL 36532-2814

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 375.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931579

Amount of Each Receipt this Period
75.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. MARY H. WILKIE

Mailing Address 1820 PEMBERTON PL

City State Zip Code
MARIETTA GA 30062-8126

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CLUB TRAVEL TRAVEL AGENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 630.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13935658

Amount of Each Receipt this Period
90.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 265.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2416 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. JO ANN WILKS	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 2511 COUNTY ROAD 169	Transaction ID: SA11.13947832
	City State Zip Code CISCO TX 76437-6704	Amount of Each Receipt this Period 830.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation MASONARY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1530.00	

B.	Full Name (Last, First, Middle Initial) ED WILL	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 3883 GALLO DR	Transaction ID: SA11.13930363
	City State Zip Code SAINT CHARLES MO 63304-1410	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

C.	Full Name (Last, First, Middle Initial) MAUDE WILLBERN	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address P.O. BOX 86	Transaction ID: SA11.13952903
	City State Zip Code BISHOP TX 78343-0086	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional)	▶	930.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2417 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RONALD WILLDEN
Mailing Address 8750 KINGS HILL DR
City State Zip Code
SALT LAKE CITY UT 84121-6136
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
RETIRED RETIRED
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 220.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0
Transaction ID: SA11.13949165
Amount of Each Receipt this Period
35.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CHARLES H. WILLEN
Mailing Address 9336 ILLINOIS RD.
City State Zip Code
FORT WAYNE IN 46804-5758
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0
Transaction ID: SA11.13952452
Amount of Each Receipt this Period
50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ERNEST JOSEPH WILLENBORG
Mailing Address P.O. BOX 5489
City State Zip Code
LAGUNA PARK TX 76644-5489
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
RETIRED RETIRED
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1701.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0
Transaction ID: SA11.13952299
Amount of Each Receipt this Period
200.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 285.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2418 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JERRY WILLE

Mailing Address 801 E 9TH ST.

City TAMA State IA Zip Code 52339-2229

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 11 / 02 / 2010
Transaction ID: SA11.13962645
Amount of Each Receipt this Period: 210.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BILL F. WILLIAMSON

Mailing Address 7085 LESLEE ST

City PORTAGE State MI Zip Code 49024-4200

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13939055
Amount of Each Receipt this Period: 76.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CALVIN CLIFFORD WILLIS

Mailing Address 194 BETTYS CREEK RD

City SYLVA State NC Zip Code 28779-7179

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 717.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13952544
Amount of Each Receipt this Period: 41.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **327.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2419 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. CAROLE WILLIAMS
Mailing Address 506 PATRICIA AVE.
City State Zip Code
CHULA VISTA CA 91910-4822
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
RETIRED RETIRED
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 460.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0
Transaction ID: SA11.13931370
Amount of Each Receipt this Period
50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CHARLES WILLIAMS
Mailing Address 272 OAKWOOD RD
City State Zip Code
ENGLEWOOD NJ 07631-2026
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
HOMEMAKER HOMEMAKER
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 295.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0
Transaction ID: SA11.13931576
Amount of Each Receipt this Period
75.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID D. WILLIAMS
Mailing Address 2027 MERRILL RD
City State Zip Code
PARADISE CA 95969-2948
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
RETIRED RETIRED
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 260.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0
Transaction ID: SA11.13929106
Amount of Each Receipt this Period
50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 175.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2420 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DEBBIE G. WILLIAMS	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 205 COMMISSARY DR.	Transaction ID: SA11.13952454
	City State Zip Code OLIVE BRANCH MS 38654-7337	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

B.	Full Name (Last, First, Middle Initial) MR. DONALD WILLIS	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 3835 E MILLERS BRIDGE RD	Transaction ID: SA11.13935470
	City State Zip Code TALLAHASSEE FL 32312-1061	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	

C.	Full Name (Last, First, Middle Initial) MR. DONALD WILLIS	Date of Receipt MM / DD / YYYY 11 / 02 / 2010
	Mailing Address 3835 E MILLERS BRIDGE RD	Transaction ID: SA11.13962499
	City State Zip Code TALLAHASSEE FL 32312-1061	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	

SUBTOTAL of Receipts This Page (optional)	▶	115.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2421 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DOROTHY WILLIAMS

Mailing Address 8550 BARTON ROAD #183

City State Zip Code
GRANITE BAY CA 95746-8843

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 520.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13951810

Amount of Each Receipt this Period

40.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
E. WILLIAMS

Mailing Address 6205 LEBLANC DRIVE

City State Zip Code
PLANO TX 75024-2906

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LUMINANT CHIEF OPERATIONS OFFICER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13932287

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. FLORENCE W. WILLIAMSON

Mailing Address 103 S YELLOWSTONE AVE.
APARTMENT D.

City State Zip Code
BOZEMAN MT 59718-1902

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 891.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940422

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

490.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2422 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. G. F. WILLIAMS, JR.	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 4342 WOODBRIDGE ROAD	Transaction ID: SA11.13954904
	City State Zip Code TALLAHASSEE FL 32303-7624	Amount of Each Receipt this Period 1.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 246.00	

B.	Full Name (Last, First, Middle Initial) MR. G. F. WILLIAMS, JR.	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 4342 WOODBRIDGE ROAD	Transaction ID: SA11.13954982
	City State Zip Code TALLAHASSEE FL 32303-7624	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 246.00	

C.	Full Name (Last, First, Middle Initial) MR. G. F. WILLIAMS, JR.	Date of Receipt MM / DD / YYYY 11 / 05 / 2010
	Mailing Address 4342 WOODBRIDGE ROAD	Transaction ID: SA11.13966059
	City State Zip Code TALLAHASSEE FL 32303-7624	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 246.00	

SUBTOTAL of Receipts This Page (optional)	31.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2423 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. G. F. WILLIAMS, JR.
Mailing Address 4342 WOODBRIDGE ROAD

City State Zip Code
TALLAHASSEE FL 32303-7624

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 246.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13972886
Amount of Each Receipt this Period
15.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GAIL D. WILLIAMS
Mailing Address P.O. BOX 92

City State Zip Code
PRESHO SD 57568-0092

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED RANCHER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13971337
Amount of Each Receipt this Period
50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES A. WILLIAMS
Mailing Address 46 WILD HORSE ROAD

City State Zip Code
CODY WY 82414-9640

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MALLARD OIL & GAS ENGINEER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 550.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13963085
Amount of Each Receipt this Period
150.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 215.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2424 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
JEAN W. WILLIAMS

Mailing Address 215 W PARKVIEW ST

City State Zip Code
DYERSBURG TN 38024-3019

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
11 / 19 / 2010

Transaction ID: SA11.13972047

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JERRY L. WILLIAMS

Mailing Address 228 WALNUT LANE

City State Zip Code
DYERSBURG TN 38024-6527

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13955324

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
JOAN I. WILLIAMS

Mailing Address 14286 DEWITT LN.

City State Zip Code
BOGALUSA LA 70427-0191

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
401.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13934235

Amount of Each Receipt this Period
1.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **201.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2425 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) JOAN I. WILLIAMS		Date of Receipt
	Mailing Address 14286 DEWITT LN.		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	BOGALUSA	LA	70427-0191
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13938281
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="401.00"/>	<input type="text" value="50.00"/>
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) DR. JOHATHAN WILLIAMS		Date of Receipt
	Mailing Address 312 S AVENUE D		<input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	BURKBURNETT	TX	76354-3564
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13918419
Name of Employer CHRISTIAN FAMILY HEALTH CLINIC		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="3000.00"/>	<input type="text" value="750.00"/>
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) LEE E. WILLIAMS		Date of Receipt
	Mailing Address 256 COUNTY ROAD 3270		<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	MINEOLA	TX	75773-3830
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13945444
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="260.00"/>	<input type="text" value="45.00"/>
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="845.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2426 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. MANSFIELD W. WILLIAMS

Mailing Address 118 GOMEZ ROAD

City State Zip Code
HOBE SOUND FL 33455-2423

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928896

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. MARGIE WILLIAMSON

Mailing Address 4 MOORE CIR.

City State Zip Code
BEDFORD MA 01730-1042

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951462

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. MARY E. WILLIAMSON

Mailing Address 7810 COUNTY ROAD 291

City State Zip Code
EARLY TX 76802-3703

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 245.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937834

Amount of Each Receipt this Period

20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

320.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2427 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. RHYS WILLIAMS	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 16129 BRISTOL POINTE DR	Transaction ID: SA11.13931767
	City State Zip Code DELRAY BEACH FL 33446-2357	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation TEQUESPA BIOVENTURES BIOTECHNOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

B.	Full Name (Last, First, Middle Initial) MR. RICHARD A. WILLIAMS	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address N4110 13TH. AVE	Transaction ID: SA11.13965424
	City State Zip Code WAUTOMA WI 54982-7134	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

C.	Full Name (Last, First, Middle Initial) MR. THOMAS MICHAEL WILLIAMS	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 1504 BRITTANY WAY	Transaction ID: SA11.13929845
	City State Zip Code ROCKWALL TX 75087-7372	Amount of Each Receipt this Period 35.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SELF-EMPLOYED CONSULTANT-RISK MGT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 366.00	

SUBTOTAL of Receipts This Page (optional)	▶	110.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2428 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. THOMAS MICHAEL WILLIAMS

Mailing Address 1504 BRITTANY WAY

City State Zip Code
ROCKWALL TX 75087-7372

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED CONSULTANT-RISK MGT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 366.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950239

Amount of Each Receipt this Period

30.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. VERA WILLIAMS

Mailing Address RR 1 BOX 1391

City State Zip Code
ALTON MO 65606-9748

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1855.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937434

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. VERA WILLIAMS

Mailing Address RR 1 BOX 1391

City State Zip Code
ALTON MO 65606-9748

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1855.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13965332

Amount of Each Receipt this Period

160.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

440.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2429 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
LINNEA WILLMAN

Mailing Address 237 MAIN ST APT A6

City State Zip Code
READING MA 01867-3605

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UNEMPLOYED UNEMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931593

Amount of Each Receipt this Period
110.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
THERESA N. WILMERDING

Mailing Address 506 WOODFIELD DR.

City State Zip Code
ASHEVILLE NC 28803-8668

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932779

Amount of Each Receipt this Period
6.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. ERIC WILNER

Mailing Address 25 HIGHLAND AVE

City State Zip Code
NEWBURYPORT MA 01950-3867

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2900.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13945404

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **316.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2430 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. CAROL L. WILSON

Mailing Address 2197 SUTTER VIEW LN.

City LINCORN State CA Zip Code 95648-7718

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 901.00

Date of Receipt: 11 / 03 / 2010
Transaction ID: SA11.13964535
 Amount of Each Receipt this Period: 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. HUGH T. WILSON

Mailing Address 10925 ROARING BROOK LANE

City HOUSTON State TX Zip Code 77024-6837

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13933464
 Amount of Each Receipt this Period: 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. JANE WILSON

Mailing Address 317 MAYFLOWER DR

City REDLANDS State CA Zip Code 92373-6178

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13951368
 Amount of Each Receipt this Period: 105.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **255.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2431 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR. JOHN A. WILSON

Mailing Address 1440 RIDGEMERE LN

City State Zip Code
WINSTON SALEM NC 27106-4483

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WAKE FOREST UNIVERSITY PH- PHYSICIAN
YSICIANS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13947628

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHN WARD WILSON

Mailing Address 417 BIRCH LANE

City State Zip Code
RICHARDSON TX 75081-5527

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DECOOLYER AND MAC NAUGHTON PETROLEUM ENGINEER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 241.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13929989

Amount of Each Receipt this Period
1.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOHN WARD WILSON

Mailing Address 417 BIRCH LANE

City State Zip Code
RICHARDSON TX 75081-5527

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DECOOLYER AND MAC NAUGHTON PETROLEUM ENGINEER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 241.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930603

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 201.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2432 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JONATHAN C. WILSON

Mailing Address 2323 VICTORY AVE SUITE 700

City State Zip Code
DALLAS TX 75219-7672

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2010

Transaction ID: SA11.13965582

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LEE E. WILSON

Mailing Address 1305 62ND AVE E

City State Zip Code
FIFE WA 98424-1311

FEC ID number of contributing federal political committee. **C**

Name of Employer AMERICAN TECH CORP
Occupation BUSINESSMAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13937384

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. LEE E. WILSON

Mailing Address 1305 62ND AVE E

City State Zip Code
FIFE WA 98424-1311

FEC ID number of contributing federal political committee. **C**

Name of Employer AMERICAN TECH CORP
Occupation BUSINESSMAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13937393

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **600.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2433 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DR. LORRAINE M. WILSON		Date of Receipt
	Mailing Address 1010 RED MILL DR		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	TECUMSEH	MI	49286-1145
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13929572
Name of Employer EASTERN MI UNIVER		Occupation PROFESSOR OF NURSING	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MARIE A. WILSON		Date of Receipt
	Mailing Address 13681 COUNTY ROAD 426		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	LINDALE	TX	75771-7847
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13941788
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 150.00
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MS. MARY A. WILSON		Date of Receipt
	Mailing Address 414 RANEY ST		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	ASHBURN	GA	31714-5238
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13931848
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 110.00
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 310.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2434 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. MARY A. WILSON

Mailing Address 3165 LISA LN

City ZANESVILLE State OH Zip Code 43701-8525

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13934755
 Amount of Each Receipt this Period: 40.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. MARY A. WILSON

Mailing Address 3165 LISA LN

City ZANESVILLE State OH Zip Code 43701-8525

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13956428
 Amount of Each Receipt this Period: 40.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. MARY C. WILSON

Mailing Address 22338 OLEAN BLVD.

City PORT CHARLOTTE State FL Zip Code 33952-5642

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13954387
 Amount of Each Receipt this Period: 200.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 280.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2435 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. MARY L. WILSON

Mailing Address 4729 CEMETERY RD

City HILLIARD State OH Zip Code 43026-1192

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 11 / 22 / 2010
Transaction ID: SA11.13971728
Amount of Each Receipt this Period: 60.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. MYRON ROBERT WILSON

Mailing Address 861 W VIA OLIVERA

City PALM SPRINGS State CA Zip Code 92262-2769

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13928925
Amount of Each Receipt this Period: 500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. NICHOLAS C. WILSON

Mailing Address 6351 EAST VISTA DRIVE

City PARADISE VALLEY State AZ Zip Code 85253-6953

FEC ID number of contributing federal political committee. **C**

Name of Employer COLLECT CORP. Occupation C.E.O.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 10 / 28 / 2010
Transaction ID: SA11.13957975
Amount of Each Receipt this Period: -2500.00
CONTRIBUTION
CHARGED BACK

SUBTOTAL of Receipts This Page (optional) ► **-1940.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2436 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. NICHOLAS C. WILSON	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 6351 EAST VISTA DRIVE	Transaction ID: SA11.13957976
	City State Zip Code PARADISE VALLEY AZ 85253-6953	Amount of Each Receipt this Period -2500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer COLLECT CORP. Occupation C.E.O.	CHARGED BACK	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

B.	Full Name (Last, First, Middle Initial) MR. NICHOLAS C. WILSON	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 6351 EAST VISTA DRIVE	Transaction ID: SA11.13957977
	City State Zip Code PARADISE VALLEY AZ 85253-6953	Amount of Each Receipt this Period -2500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer COLLECT CORP. Occupation C.E.O.	CHARGED BACK	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

C.	Full Name (Last, First, Middle Initial) MR. RICHARD P. WILSON	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 2401 WINGATE CT	Transaction ID: SA11.13946811
	City State Zip Code BAKERSFIELD CA 93311-9267	Amount of Each Receipt this Period 251.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS	CHARGED BACK	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 351.00	

SUBTOTAL of Receipts This Page (optional)	-4749.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2437 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. SHIRLEY E. WILSON

Mailing Address 904 GA HIGHWAY 338

City State Zip Code
DUDLEY GA 31022-2313

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13933225

Amount of Each Receipt this Period
76.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM R. WILSON

Mailing Address 1853 PAGE PL

City State Zip Code
MALVERN PA 19355-9718

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937637

Amount of Each Receipt this Period
135.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. BILL WIMBERLEY

Mailing Address 55 COUNTY RD 8361

City State Zip Code
RIENZI MS 38865-8305

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BILLS BACKHOE SERVICE OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959082

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **311.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2438 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) SYLVIA JUNE WINDER	Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address 4002 16TH. ST. APT. 4401	Transaction ID: SA11.13962989
	City State Zip Code LUBBOCK TX 79416-6039	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation INVESTMENTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	

B.	Full Name (Last, First, Middle Initial) THOMAS E. WINDHAM	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 14215 BONNEY BRIER DR	Transaction ID: SA11.13946757
	City State Zip Code HOUSTON TX 77069-1325	Amount of Each Receipt this Period 101.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 261.00	

C.	Full Name (Last, First, Middle Initial) DR. RICHARD L. WINDSOR	Date of Receipt MM / DD / YYYY 11 / 02 / 2010
	Mailing Address 110 E HICKORY GROVE RD	Transaction ID: SA11.13962570
	City State Zip Code HARTFORD CITY IN 47348-1007	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer THE EYE ASSOCIATES GROUP LLC	Occupation PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 570.00	

SUBTOTAL of Receipts This Page (optional)	231.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2439 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. SUSAN E. WINGATE

Mailing Address 4685 ELK VALLEY COURT

City State Zip Code
WINSTON SALEM NC 27103-9718

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation NURSING HOME COORDINATER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936186

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. KENNETH A. WINKLE

Mailing Address 100 EDGEWOOD RD

City State Zip Code
BRIDGEPORT WV 26330-9360

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 1 0

Transaction ID: SA11.13965925

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. KENNETH A. WINKLE

Mailing Address 100 EDGEWOOD RD

City State Zip Code
BRIDGEPORT WV 26330-9360

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 1 0

Transaction ID: SA11.13965983

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 200.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2440 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. ALDEN B. WINTERS		Date of Receipt
	Mailing Address 2811 KABAH CT		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	GALVESTON	TX	77554-6469
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13951353
Name of Employer BLACK HAWK MANAGEMENT INC.		Occupation CONSULTING ENGINEER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="100.00"/>
		<input type="text" value="1261.00"/>	CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MR. ALDEN B. WINTERS		Date of Receipt
	Mailing Address 2811 KABAH CT		<input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	GALVESTON	TX	77554-6469
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13964396
Name of Employer BLACK HAWK MANAGEMENT INC.		Occupation CONSULTING ENGINEER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="39.00"/>
		<input type="text" value="1261.00"/>	CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MR. GARY P. WINTERS		Date of Receipt
	Mailing Address 4177 SIENA DR.		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	FRISCO	TX	75034-7107
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13928525
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="50.00"/>
		<input type="text" value="585.00"/>	CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="189.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2441 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. LARRY WINTERS		Date of Receipt
	Mailing Address 405 BRIDGETENDER DR.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 18 / 2010
	City	State	Zip Code
	RALEIGH	NC	27615-1404
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13928853
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 5000.00
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MS. LUCIENNE M. WINTER		Date of Receipt
	Mailing Address 6320 S 66TH ST		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 19 / 2010
	City	State	Zip Code
	LINCOLN	NE	68516-3689
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13931641
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 105.00
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MR. MARTIN WINTERS		Date of Receipt
	Mailing Address 1617 KILOUGH CHURCH RD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 14 / 2010
	City	State	Zip Code
	DAWSONVILLE	GA	30534-6956
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13918487
Name of Employer APPRAISAL ADVISER		Occupation REALESTATE APPRASER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 100.00
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 5205.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2442 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. WILLIAM F. WISCHMEYER	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 1 MCKNIGHT PLACE APARTMENT 406	Transaction ID: SA11.13940036
	City SAINT LOUIS State MO Zip Code 63124-1985	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 432.00	

B.	Full Name (Last, First, Middle Initial) MR. WILLIAM F. WISCHMEYER	Date of Receipt MM / DD / YYYY 10 / 29 / 2010
	Mailing Address 1 MCKNIGHT PLACE APARTMENT 406	Transaction ID: SA11.13961588
	City SAINT LOUIS State MO Zip Code 63124-1985	Amount of Each Receipt this Period 26.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 432.00	

C.	Full Name (Last, First, Middle Initial) MR. WILLIAM F. WISCHMEYER	Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address 1 MCKNIGHT PLACE APARTMENT 406	Transaction ID: SA11.13963685
	City SAINT LOUIS State MO Zip Code 63124-1985	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 432.00	

SUBTOTAL of Receipts This Page (optional)	101.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2443 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. WILLIAM F. WISCHMEYER

Mailing Address 1 MCKNIGHT PLACE
APARTMENT 406

City SAINT LOUIS State MO Zip Code 63124-1985

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 432.00

Date of Receipt 11 / 15 / 2010

Transaction ID: SA11.13968868

Amount of Each Receipt this Period 30.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. CONNIE N. WISE

Mailing Address 400 UNIVERSITY PARK DRIVE
APARTMENT 250

City BIRMINGHAM State AL Zip Code 35209-6776

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 257.00

Date of Receipt 10 / 18 / 2010

Transaction ID: SA11.13933075

Amount of Each Receipt this Period 46.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DR. DOUGLAS W. WISOR

Mailing Address 11905 LERADE CT

City GLEN ALLEN State VA Zip Code 23059-7067

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 18 / 2010

Transaction ID: SA11.13929798

Amount of Each Receipt this Period 250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 326.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2444 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. BRIAN WITKOWSKI

Mailing Address 8119 W WINNEMAC AVE

City NORRIDGE State IL Zip Code 60706-3142

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13957364
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM R. WITMER

Mailing Address 3182 PINE ROAD

City DANIELSVILLE State PA Zip Code 18038-9629

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13950606
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WILLIAM W. WITTEN

Mailing Address 710 N LINWOOD AVE

City SANTA ANA State CA Zip Code 92701-4333

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13933980
Amount of Each Receipt this Period: 200.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 325.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2445 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
WILLIAM W. WITTEN

Mailing Address 710 N LINWOOD AVE

City State Zip Code
SANTA ANA CA 92701-4333

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13936198

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. LORINE M. WITTKOPP

Mailing Address 1859 9TH. ST.

City State Zip Code
BAY CITY MI 48708-6741

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 235.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13945034

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PHILLIP WITTMER

Mailing Address 7555 E STATE ROAD 66

City State Zip Code
CANNELTON IN 47520-6632

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 325.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955782

Amount of Each Receipt this Period
150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 400.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2446 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. CHARLES W. WOHR
Mailing Address 6 ROBERTS LN.

City State Zip Code
EAST MORICHES NY 11940-1501

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 280.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959958

Amount of Each Receipt this Period
35.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. CHARLIE V. WOJCIK
Mailing Address 1468 CORBIN DR.

City State Zip Code
MILFORD OH 45150-2489

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955951

Amount of Each Receipt this Period
-20.00

CONTRIBUTION

CHARGED BACK

C.

Full Name (Last, First, Middle Initial)
MR. EDWARD O. WOLCOTT
Mailing Address 4624 NW 17TH PLACE

City State Zip Code
GAINESVILLE FL 32605-3418

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939760

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

115.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2447 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DENNIS R. WOLF

Mailing Address 6943 HOLLOW VIEW WAY

City WEST JORDAN State UT Zip Code 84084-2523

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 11 / 16 / 2010
Transaction ID: SA11.13969205
Amount of Each Receipt this Period: 120.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ESTHER B. WOLF

Mailing Address 30297 MOWRY RD.

City BURR OAK State MI Zip Code 49030-9771

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13943118
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. FREDERICK WOLFERT

Mailing Address 1491 JACKSONS RIDGE RD

City GREENSBORO State GA Zip Code 30642-5279

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation EXEC.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11.13931443
Amount of Each Receipt this Period: 250.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 410.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2448 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JAMES WOLFE

Mailing Address 738 CRISFIELD WAY

City State Zip Code
ANNAPOLIS MD 21401-4575

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 02 / 2010

Transaction ID: SA11.13962669

Amount of Each Receipt this Period

220.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. JANET M. WOLFE

Mailing Address 6251 OLD DOMINION DRIVE
APARTMENT 162

City State Zip Code
MCLEAN VA 22101-4805

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
RETIRED

Aggregate Year-to-Date ▼
331.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 14 / 2010

Transaction ID: SA11.13930943

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
JOHN A. WOLFE

Mailing Address 9901 N 51ST. PL.

City State Zip Code
PARADISE VLY AZ 85253-1013

FEC ID number of contributing federal political committee. **C**

Name of Employer
US PUBLIC HEALTH SERVICE

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
PHYSICIAN

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 25 / 2010

Transaction ID: SA11.13952651

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

345.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2449 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. MARC S. WOLFERT

Mailing Address 400 9TH ST
APT W5G

City State Zip Code
HOBOKEN NJ 07030-2177

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
285.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930284

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. MARC S. WOLFERT

Mailing Address 400 9TH ST
APT W5G

City State Zip Code
HOBOKEN NJ 07030-2177

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
285.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11.13971365

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. RALPH E. WOLSTENHOLME

Mailing Address 121 PRITCHARD HOLLOW RD

City State Zip Code
WESTFIELD PA 16950-1416

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
570.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962615

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

200.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2450 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. TODD A. WOMBLE

Mailing Address 4930 HOLLY ST

City State Zip Code
BELLAIRE TX 77401-5715

FEC ID number of contributing federal political committee. **C**

Name of Employer WCI Occupation VICE PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 435.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951489

Amount of Each Receipt this Period
160.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CLAY WOOD

Mailing Address 16 SAN CLEMENTE CIR

City State Zip Code
ODESSA TX 79765-8524

FEC ID number of contributing federal political committee. **C**

Name of Employer SHESTEN NATIONAL BANK Occupation BANKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.13972862

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. DAVID R. WOOD

Mailing Address 5586 EICHMAN ROAD

City State Zip Code
VON ORMY TX 78073-5609

FEC ID number of contributing federal political committee. **C**

Name of Employer WOOD MEDICAL GROUP Occupation PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928536

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 460.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2451 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. DIANNA WOOD	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 8 / 2 0 1 0
	Mailing Address 6477 N 2300 LN	Transaction ID: SA11.13960227
	City State Zip Code WEST SALEM IL 62476-3044	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00

B.	Full Name (Last, First, Middle Initial) MS. KAYE N. WOOD	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 1 0
	Mailing Address 4902 LAKE FOREST AVE	Transaction ID: SA11.13956904
	City State Zip Code NORTHPORT AL 35473-1645	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 375.00

C.	Full Name (Last, First, Middle Initial) MS. KAYE N. WOOD	Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 8 / 2 0 1 0
	Mailing Address 4902 LAKE FOREST AVE	Transaction ID: SA11.13966683
	City State Zip Code NORTHPORT AL 35473-1645	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 375.00

SUBTOTAL of Receipts This Page (optional)	▶	115.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2452 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. KENNETH H. WOOD

Mailing Address 1226 BIRCH LN

City State Zip Code
CODY WY 82414-5212

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED REAL ESTATE BROKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956973

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. LOIS R. WOOD

Mailing Address P.O. BOX 6

City State Zip Code
VIDALIA GA 30475-0006

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13947131

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. LOIS R. WOOD

Mailing Address P.O. BOX 6

City State Zip Code
VIDALIA GA 30475-0006

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13965340

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **300.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2453 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DR. PAMELA K. WOODARD, M.D.

Mailing Address 510 S KINGSHIGHWAY BLVD

City State Zip Code
SAINT LOUIS MO 63110-1016

FEC ID number of contributing federal political committee. **C**

Name of Employer
MALLINCKRODT INSTITUTE OF RADIOLOGY

Occupation
PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
520.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13942575

Amount of Each Receipt this Period

260.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. HOWARD D. WOODFORD

Mailing Address 109 SKY PARK CV

City State Zip Code
FLORENCE AL 35634-2427

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.13962622

Amount of Each Receipt this Period

210.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
R WOODRUFF

Mailing Address 6210 SHELTER COVE POINTE

City State Zip Code
MIDLOTHIAN VA 23112-2243

FEC ID number of contributing federal political committee. **C**

Name of Employer
RICHMOND CONSULTING GROUP

Occupation
CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13948159

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

720.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2454 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CHARLES WOODSBY

Mailing Address 1260 CENTRAL FLORIDA PKWY

City State Zip Code
ORLANDO FL 32837-9259

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	8	/	2	0	1	0

Transaction ID: SA11.13966761

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOSEPH WOODS

Mailing Address 3720 COTTRELL RD

City State Zip Code
RICHMOND VA 23234-2934

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	6	/	2	0	1	0

Transaction ID: SA11.13968612

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PAUL WOODS

Mailing Address P.O. BOX 129

City State Zip Code
IRONTON OH 45638-0129

FEC ID number of contributing federal political committee. **C**

Name of Employer IRONTON PORT AUTHORITY Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	4	/	2	0	1	0

Transaction ID: SA11.13918734

Amount of Each Receipt this Period
80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1180.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2455 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

PAUL WOODS

Mailing Address P.O. BOX 129

City State Zip Code
IRONTON OH 45638-0129

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
IRONTON PORT AUTHORITY EXECUTIVE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13955555

Amount of Each Receipt this Period

80.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

SHIRLEY WOODS

Mailing Address 207 COUNTY RD. 604

City State Zip Code
KIRBYVILLE TX 75956-3543

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CAVETT, TURNER AND WYBLE LLP CPA

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 420.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13945061

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. CHARLES F. WOODWARD

Mailing Address 13724 PARADISE VILLAS GRV

City State Zip Code
COLORADO SPRINGS CO 80921-3295

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 459.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949710

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

230.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2456 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. EDWARD J. WOODWARD

Mailing Address 4606 KING WILLIAM ROAD

City RICHMOND State VA Zip Code 23225-3248

FEC ID number of contributing federal political committee. **C**

Name of Employer RANDOLPH MACON COLLEGE Occupation COLLEGE PROFESSOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 430.00

Date of Receipt: 10 / 18 / 2010

Transaction ID: SA11.13934994

Amount of Each Receipt this Period: 100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MICHAEL D. WOODWARD

Mailing Address 4 GUZZLEBROOK DRIVE

City SUDBURY State MA Zip Code 01776-3168

FEC ID number of contributing federal political committee. **C**

Name of Employer ITG Occupation SOFTWARE MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt: 10 / 19 / 2010

Transaction ID: SA11.13939276

Amount of Each Receipt this Period: 225.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. PEGGY E. WOODY

Mailing Address 726 OUTLOOK LN

City CHATTANOOGA State TN Zip Code 37419-2221

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt: 11 / 03 / 2010

Transaction ID: SA11.13965230

Amount of Each Receipt this Period: 101.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 426.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2457 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JEFFREY L. WOOLEY

Mailing Address 1529 E WOOD OAKS

City State Zip Code
SPRINGFIELD MO 65804-7111

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CCI PRESIDENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 890.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13928072

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ROBERT F. WORLEY

Mailing Address 31888 PONDSIDE DR

City State Zip Code
AVON LAKE OH 44012-2796

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13944744

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. ROBERT WORMALD

Mailing Address 10121 CHAPEL RD

City State Zip Code
POTOMAC MD 20854-4144

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931934

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

410.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2458 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. MARGE WORMINGTON		Date of Receipt
	Mailing Address 280 US HIGHWAY 14A E		<input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	LOVELL	WY	82431-9706
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13928574
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="220.00"/>	<input type="text" value="15.00"/>
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MR. JAMES W. WRAY		Date of Receipt
	Mailing Address 1519 FAIRFIELD RD.		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	HENRY	VA	24102-3231
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13960232
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="260.00"/>	<input type="text" value="50.00"/>
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) DR. RICHARD N. WRENN		Date of Receipt
	Mailing Address 8919 PARK RD APT 5011		<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	CHARLOTTE	NC	28210-7613
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer RICHARD NICKLES WRENN, MD		Occupation OWNER	Transaction ID: SA11.13938555
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="440.00"/>	<input type="text" value="150.00"/>
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="215.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2459 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ELSON KENNETH WRIDE

Mailing Address 1016 W 32ND. ST.

City Loveland State CO Zip Code 80538-2504

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 26 / 2010

Transaction ID: SA11.13956154

Amount of Each Receipt this Period 75.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. CONNIE M. WRIGHT

Mailing Address 652 LAKENGREN DR

City Eaton State OH Zip Code 45320-2664

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 26 / 2010

Transaction ID: SA11.13951459

Amount of Each Receipt this Period 60.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. ELLEN WRIGHT

Mailing Address 388 NELSON DR

City Geneva State IL Zip Code 60134-4693

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 28 / 2010

Transaction ID: SA11.13960142

Amount of Each Receipt this Period 50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 185.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2460 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. HOLLY C. WRIGHT, SR.
Mailing Address PO BOX 638

City State Zip Code
ROCKINGHAM NC 28380-0638

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BHM INC. PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: MM / DD / YYYY
10 / 20 / 2010

Transaction ID: SA11.13938541

Amount of Each Receipt this Period: 150.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOSEPH WRIGHT
Mailing Address 4524 28TH RD S APT B

City State Zip Code
ARLINGTON VA 22206-3375

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13931791

Amount of Each Receipt this Period: 150.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. JULIE WRIGHT
Mailing Address 1195 TURQUOISE DR

City State Zip Code
LONGMONT CO 80504-7304

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 236.00

Date of Receipt: MM / DD / YYYY
11 / 05 / 2010

Transaction ID: SA11.13966344

Amount of Each Receipt this Period: 75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **375.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2461 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. KAREN A. WRIGHT

Mailing Address 1240 GAMBIER ROAD

City State Zip Code
MOUNT VERNON OH 43050-3842

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ARIEL CORP PRESIDENT & CEO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 20000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13945232

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. LARRY F. WRIGHT

Mailing Address P.O. BOX 300

City State Zip Code
LONDON TX 76854-0300

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950120

Amount of Each Receipt this Period

300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
LEON THOMAS WRIGHT

Mailing Address 111 CIR. DR.

City State Zip Code
SWANSBORO NC 28584-8076

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 365.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13951732

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10350.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2462 / 3187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. MARINA C. WRIGHT		Date of Receipt
	Mailing Address 21705 HERSCHEL ROAD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 2 / 2 0 1 0
	City	State	Zip Code
	SONOMA	CA	95476-9658
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13948661
		Amount of Each Receipt this Period	<input type="text"/> 300.00
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 600.00	

B.	Full Name (Last, First, Middle Initial) WALLACE M. WRIGHT		Date of Receipt
	Mailing Address 401 WESTERN BIT		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 8 / 2 0 1 0
	City	State	Zip Code
	HORSESHOE BAY	TX	78657-5690
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13929019
		Amount of Each Receipt this Period	<input type="text"/> 75.00
Name of Employer RETIRED		Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 1218.50	

C.	Full Name (Last, First, Middle Initial) WILLIAM B. WRIGHT		Date of Receipt
	Mailing Address 1275 VALLEY VISTA LN		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 8 / 2 0 1 0
	City	State	Zip Code
	FOREST	VA	24551-4366
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13932895
		Amount of Each Receipt this Period	<input type="text"/> 501.00
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 1001.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 876.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2463 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
JOHN CHARLES WYATT

Mailing Address 765 HINTON PLACE RD

City State Zip Code
TUSCALOOSA AL 35405-9609

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13934653

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. ESTHER WYMER

Mailing Address P.O. BOX 56

City State Zip Code
FAIRVIEW OK 73737-0056

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940698

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
SUZANNE WYNESS

Mailing Address 91 W PLAZA DEL SOL

City State Zip Code
ISLAMORADA FL 33036-4120

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
301.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13951963

Amount of Each Receipt this Period

101.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

351.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2464 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. DOROTHY WYNN	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 706 8TH. ST. NW	Transaction ID: SA11.13952111
	City State Zip Code SPRINGHILL LA 71075-2406	Amount of Each Receipt this Period 35.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 366.00

B.	Full Name (Last, First, Middle Initial) C E. WYSONG	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 513 MOUND ST	Transaction ID: SA11.13946767
	City State Zip Code BROOKVILLE OH 45309-1326	Amount of Each Receipt this Period 101.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 451.00

C.	Full Name (Last, First, Middle Initial) C E. WYSONG	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 513 MOUND ST	Transaction ID: SA11.13959623
	City State Zip Code BROOKVILLE OH 45309-1326	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 451.00

SUBTOTAL of Receipts This Page (optional)	▶	386.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2465 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. PATRICIA A. WYSONG

Mailing Address 2707 CLUBLAKE TRL

City State Zip Code
MCKINNEY TX 75070-4009

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PUBLIC SPEAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959072

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. VICTOR F. YACULLO

Mailing Address 22050 N 97TH ST.

City State Zip Code
SCOTTSDALE AZ 85255-4405

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BINGHAM MCCUTCHE ATTORNEY

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13937332

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. VICTOR F. YACULLO

Mailing Address 22050 N 97TH ST.

City State Zip Code
SCOTTSDALE AZ 85255-4405

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BINGHAM MCCUTCHE ATTORNEY

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13956605

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

325.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2466 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. MARY YAGER	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 5641 HOLLY SPRINGS DR.	Transaction ID: SA11.13928022
	City State Zip Code HOUSTON TX 77056-2025	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 340.00	

B.	Full Name (Last, First, Middle Initial) MS. MARY YAGER	Date of Receipt MM / DD / YYYY 11 / 22 / 2010
	Mailing Address 5641 HOLLY SPRINGS DR.	Transaction ID: SA11.13973038
	City State Zip Code HOUSTON TX 77056-2025	Amount of Each Receipt this Period 55.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 340.00	

C.	Full Name (Last, First, Middle Initial) MS. WAIVE T. YAGER	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 1007 20MILE ROAD	Transaction ID: SA11.13940003
	City State Zip Code LANCE CREEK WY 82222	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation RANCHER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 340.00	

SUBTOTAL of Receipts This Page (optional)	▶	185.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2467 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. WAIVE T. YAGER

Mailing Address 1007 20MILE ROAD

City State Zip Code
LANCE CREEK WY 82222

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation RANCHER

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 340.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13941153
Amount of Each Receipt this Period: 30.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. WAIVE T. YAGER

Mailing Address 1007 20MILE ROAD

City State Zip Code
LANCE CREEK WY 82222

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation RANCHER

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 340.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13957183
Amount of Each Receipt this Period: 45.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JACK YALE

Mailing Address P.O. BOX 54

City State Zip Code
TRAPHILL NC 28685-0054

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 10 / 14 / 2010
Transaction ID: SA11.13930439
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 125.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2468 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JACK YALE

Mailing Address P.O. BOX 54

City State Zip Code
TRAPHILL NC 28685-0054

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961652

Amount of Each Receipt this Period
50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. RAJU R. YALIMANCHILIE

Mailing Address 13726 CAMELOT CENTER COURT

City State Zip Code
HOUSTON TX 77069-2255

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13955967

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. BEVERLY YANCEY

Mailing Address 2700 MASTERS CT

City State Zip Code
MARION IL 62959-5269

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13960200

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **2600.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2469 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. WALLACE GLENN YANCEY		Date of Receipt
	Mailing Address PO BOX 758		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	LANETT	AL	36863-0758
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer RETIRED		Occupation RETIRED	Transaction ID: SA11.13931707
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="410.00"/>	<input type="text" value="410.00"/>
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) DARLA M. YARBROUGH		Date of Receipt
	Mailing Address 26200 COUNTY 9		<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	BEMIDJI	MN	56601-6119
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13943520
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="240.00"/>	<input type="text" value="40.00"/>
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) ROBERT YARBROUGH		Date of Receipt
	Mailing Address 16050 FONTAINE AVE		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	AUSTIN	TX	78734-2649
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer RETIRED		Occupation RETIRED	Transaction ID: SA11.13931900
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="435.00"/>	<input type="text" value="185.00"/>
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="635.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2470 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. NEIL YARIS	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 59 DURAND RD.	Transaction ID: SA11.13955969
	City State Zip Code MAPLEWOOD NJ 07040-2103	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation BANK OF AMERICA MERRILL LYNCH BOND TRADER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

B.	Full Name (Last, First, Middle Initial) TOM YATES	Date of Receipt MM / DD / YYYY 11 / 10 / 2010
	Mailing Address 3951 HWY 314 S W	Transaction ID: SA11.13967200
	City State Zip Code LOS LUNAS NM 87031-9765	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation ALPHA S. W. C.E.O.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

C.	Full Name (Last, First, Middle Initial) MR. TIMOTHY E. YATSKO	Date of Receipt MM / DD / YYYY 10 / 31 / 2010
	Mailing Address 11751 HICKORY DR.	Transaction ID: SA11.13960684
	City State Zip Code BENTONVILLE AR 72712-8784	Amount of Each Receipt this Period 1500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation WAL-MART STORES, INC RETAIL EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

SUBTOTAL of Receipts This Page (optional)	4100.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2471 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. WALLACE YAY

Mailing Address 10338 PORTRUSH DR

City State Zip Code
DALLAS TX 75243-5129

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
MM / DD / YYYY
10 / 29 / 2010

Transaction ID: SA11.13961700

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. WALLACE YAY

Mailing Address 10338 PORTRUSH DR

City State Zip Code
DALLAS TX 75243-5129

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
MM / DD / YYYY
11 / 18 / 2010

Transaction ID: SA11.13971194

Amount of Each Receipt this Period
60.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DR. DOYLE A. YEAGER

Mailing Address 17900 COUNTY ROAD 112

City State Zip Code
BRISTOL IN 46507-8876

FEC ID number of contributing federal political committee. **C**

Name of Employer ELKHART EMERGENCY
Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13928973

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **125.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2472 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. ELIZABETH YEATMAN	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 1 0
	Mailing Address P.O. BOX 848	Transaction ID: SA11.13935667
	City State Zip Code MONTROSS VA 22520-0848	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation ACCOUNTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) MR. ROBERT A. YELLOWLEES	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 1 0
	Mailing Address P.O. BOX 53134	Transaction ID: SA11.13936880
	City State Zip Code ATLANTA GA 30355-1134	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) MRS. MARION S. YERKES	Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 2 / 2 0 1 0
	Mailing Address 3679 BLACKFOOT CT. SW	Transaction ID: SA11.13972838
	City State Zip Code GRANDVILLE MI 49418-1721	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 371.00	

SUBTOTAL of Receipts This Page (optional)	600.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2473 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
FLORA M. YERKOVICH

Mailing Address 2102 N CHESTNUT CIR.

City State Zip Code
MESA AZ 85213-2216

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FLONAIRE FAR & CARE CAREGIVER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 211.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13932684

Amount of Each Receipt this Period

51.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
FLORA M. YERKOVICH

Mailing Address 2102 N CHESTNUT CIR.

City State Zip Code
MESA AZ 85213-2216

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FLONAIRE FAR & CARE CAREGIVER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 211.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13959617

Amount of Each Receipt this Period

80.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DR. JAMES YEUNG

Mailing Address 7301 N LINCOLN AVE
205

City State Zip Code
LINCOLNWOOD IL 60712-1735

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CENTER FOR RENAL REPLACEMENT - UPTOWN PHYSICIAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13943357

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

231.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2474 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JOHN I. YKEMA

Mailing Address 1343 W BALTIMORE PIKE APT. E41

City State Zip Code
MEDIA PA 19063-5519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
L-3 COMMUNICATIONS ENGINEER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
11 / 12 / 2010

Transaction ID: SA11.13968102

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. ALBERTA M. YOKIMCUS

Mailing Address 1 ROYAL OAKS DR.

City State Zip Code
CHARLEROI PA 15022-3329

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 290.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2010

Transaction ID: SA11.13951588

Amount of Each Receipt this Period
70.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
R. YOLITZ

Mailing Address 820 HOLLAND CT.

City State Zip Code
HAMPTON GA 30228-3399

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PHYSICAL THERAPIST

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 550.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: SA11.13940681

Amount of Each Receipt this Period
150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

320.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2475 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. DANIEL YONG		Date of Receipt
	Mailing Address 1550 LOWES DR STE F		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 6 / 2 0 1 0
	City	State	Zip Code
	MURRAY	KY	42071-3629
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13951555
Name of Employer AUGUST MOON		Occupation OWNER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 110.00
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) RAY YONKER		Date of Receipt
	Mailing Address 961 N FLETCHER AVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 1 8 / 2 0 1 0
	City	State	Zip Code
	VALLEY STREAM	NY	11580-1337
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13935205
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 100.00
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) RAY YONKER		Date of Receipt
	Mailing Address 961 N FLETCHER AVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 1 / 2 0 1 0
	City	State	Zip Code
	VALLEY STREAM	NY	11580-1337
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13946657
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 100.00
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 310.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2477 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MICHELE YOST

Mailing Address 3403 STANOLIND

City MIDLAND State TX Zip Code 79707-6653

FEC ID number of contributing federal political committee. **C**

Name of Employer MIDLAN ISD Occupation TEACHER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13940931
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. KATHERINE J. YUELL

Mailing Address 3910 BALDWIN RD.

City CHESTER State VA Zip Code 23831-4703

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 470.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13941532
Amount of Each Receipt this Period: 90.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DARRELL L. YOUNG

Mailing Address 1803 N. 4TH ST.

City GRAND JCT State CO Zip Code 81501-2101

FEC ID number of contributing federal political committee. **C**

Name of Employer C.Y. INSURANCE SERVICE Occupation INSURANCE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 476.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13956645
Amount of Each Receipt this Period: 75.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 215.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2478 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DAVID JOSEPH YOUNG

Mailing Address 305 SPRING BRANCH RD SW

City State Zip Code
SUPPLY NC 28462-2152

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13939621

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GERALD YOUNG

Mailing Address 1301 E 12TH. ST.

City State Zip Code
JOPLIN MO 64801-5056

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950220

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GRANT C. YOUNG

Mailing Address 23633 CARROLL RD

City State Zip Code
LANARK IL 61046-8890

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 431.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13948567

Amount of Each Receipt this Period
101.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **301.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2479 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES F. YOUNG

Mailing Address 100 N. CORPORATE DR - SUITE 10

City State Zip Code
BROOKFIELD WI 53045

FEC ID number of contributing federal political committee. **C**

Name of Employer
DIVERSIFIED INSURANCE SERVICES
Occupation
INSURANCE SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
880.00

Date of Receipt
MM / DD / YYYY
11 / 03 / 2010

Transaction ID: SA11.13964533

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. JENNIFER B. YOUNG

Mailing Address 400 HANSON LANE

City State Zip Code
ALEXANDRIA VA 22302-4210

FEC ID number of contributing federal political committee. **C**

Name of Employer
TARPLIN, DOWNS, & YOUNG LLC
Occupation
CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
10 / 27 / 2010

Transaction ID: SA11.13959353

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN R. YOUNG

Mailing Address 225 STARLYN AVE

City State Zip Code
NEW ALBANY MS 38652-2429

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER BEST EFFORTS
Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
MM / DD / YYYY
11 / 10 / 2010

Transaction ID: SA11.13967625

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1200.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2480 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. PATRICIA YOUNG

Mailing Address 1304 RICHARD STREET

City State Zip Code
MIAMISBURG OH 45342-1952

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13928871

Amount of Each Receipt this Period
55.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RICHARD A. YOUNG

Mailing Address 400 WESLEY DR APT 466

City State Zip Code
ASHEVILLE NC 28803-7306

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	9	/	2	0	1	0

Transaction ID: SA11.13961935

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ROBERT W. YOUNG

Mailing Address 125 BONNE TERRE DR.

City State Zip Code
EADS TN 38028-3340

FEC ID number of contributing federal political committee. **C**

Name of Employer SEEDS INC.
Occupation OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
301.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	6	/	2	0	1	0

Transaction ID: SA11.13969153

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **305.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2481 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ROBERT W. YOUNG

Mailing Address 125 BONNE TERRE DR.

City State Zip Code
EADS TN 38028-3340

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SEEDS INC. OWNER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 301.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13969189

Amount of Each Receipt this Period
1.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. THOMAS P. YOUNG

Mailing Address 7 CENTER XING

City State Zip Code
FAIRPORT NY 14450-8715

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HARTS, SEARST & EMERY, LLP ATTORNEY

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961396

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID A. YOUNKMAN

Mailing Address PO BOX 705

City State Zip Code
WEST LIBERTY OH 43357-0705

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MY DEVELOPMENT LTD. OWNER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13959040

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 601.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2482 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. OPAL YOUNTS

Mailing Address 1302 TOM TEMPLE DR. APT. 411

City State Zip Code
LUFKIN TX 75904-5514

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13931590

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DR. ROBERT S. YUHAS

Mailing Address 530 LOMAS SANTA FE DR
0

City State Zip Code
SOLANA BEACH CA 92075-1350

FEC ID number of contributing federal political committee. **C**

Name of Employer
ROBERT S YUHAS MD INC

Occupation
PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13928859

Amount of Each Receipt this Period

300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. LEANN J. ZABLOTNEY

Mailing Address 801 16TH AVENUE SE

City State Zip Code
MINOT ND 58701-6772

FEC ID number of contributing federal political committee. **C**

Name of Employer
MAGIC CITY IMPLEMENT

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
620.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13951461

Amount of Each Receipt this Period

120.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

520.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2483 / 3187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. MARILYN ZAKLAN		Date of Receipt	
	Mailing Address 14500 FRUITVALE AVE APT 4106		M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11.13951302
	SARATOGA	CA	95070-6192	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		200.00	
Name of Employer RETIRED		Occupation RETIRED		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		360.00		

B.	Full Name (Last, First, Middle Initial) MR. ALBERT S. ZAMBONE		Date of Receipt	
	Mailing Address 115 STATHEMS NECK RD		M M / D D / Y Y Y Y Y 1 0 / 1 9 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11.13939246
	GREENWICH	NJ	08323-2422	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		500.00	
Name of Employer RETIRED		Occupation RETIRED		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		500.00		

C.	Full Name (Last, First, Middle Initial) MS. INEZ B. ZARING COURTADE		Date of Receipt	
	Mailing Address 3950 SCENIC RIDGE #247		M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11.13954297
	TRAVERSE CITY	MI	49684-3908	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		40.00	
Name of Employer RETIRED		Occupation RETIRED		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		255.00		

SUBTOTAL of Receipts This Page (optional)	▶	740.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2484 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ERNIE PAUL ZARLENGO

Mailing Address 2550 E FLORA PL

City State Zip Code
DENVER CO 80210-6826

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13940431
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ERNIE PAUL ZARLENGO

Mailing Address 2550 E FLORA PL

City State Zip Code
DENVER CO 80210-6826

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt: 11 / 12 / 2010
Transaction ID: SA11.13968346
Amount of Each Receipt this Period: 60.00
CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. ANNE C. ZARTMAN

Mailing Address 1212 FOREST HILLS DR

City State Zip Code
LAUREL MS 39440-1122

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13931636
Amount of Each Receipt this Period: 160.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **270.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2485 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
LORENA ZATCOFF

Mailing Address 3 LEIGHTON COURT

City ATLANTA State GA Zip Code 30327-4308

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13931863
Amount of Each Receipt this Period: 175.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
H W. ZEANA H

Mailing Address 11017 MOUNT CHARRON RD NW

City HUNTSVILLE State AL Zip Code 35810-1228

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA11.13928343
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
H W. ZEANA H

Mailing Address 11017 MOUNT CHARRON RD NW

City HUNTSVILLE State AL Zip Code 35810-1228

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13941626
Amount of Each Receipt this Period: 51.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

276.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2486 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RONALD H. ZECH

Mailing Address 28 PENINSULA ROAD

City State Zip Code
BELVEDERE CA 94920-2326

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13929752

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. MARJORIE P. ZEIGLER

Mailing Address 405 N. WILDWOOD LN.

City State Zip Code
MUNCIE IN 47304-3974

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13945758

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT K. ZEITLER, SR.

Mailing Address 1209 DIAMOND VALLEY DR.

City State Zip Code
HIGH RIDGE MO 63049-1147

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13940923

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 300.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2487 / 3187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. SAM ZELL	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 2 NORTH RIVERSIDE PLAZA SUITE 600	Transaction ID: SA11.13961174
	City State Zip Code CHICAGO IL 60606-2627	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer EQUITY GROUP INVESTMENTS Occupation CHAIRMAN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00	

B.	Full Name (Last, First, Middle Initial) MR. SAM ZELTSER	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 4320 PARK AVE	Transaction ID: SA11.13964440
	City State Zip Code BRONX NY 10457-2442	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer SVYZ TRADING CORPORATION Occupation PRESIDENT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) MR. MATTHEW J. ZENTNER	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 116 PINE ST.	Transaction ID: SA11.13933823
	City State Zip Code RICHLAND CENTER WI 53581-9204	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 238.00	

SUBTOTAL of Receipts This Page (optional)	2280.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2488 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. MATTHEW J. ZENTNER		Date of Receipt
	Mailing Address 116 PINE ST.		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	RICHLAND CENTER	WI	53581-9204
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: SA11.13934668
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="30.00"/>
		<input type="text" value="238.00"/>	CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MR. MATTHEW J. ZENTNER		Date of Receipt
	Mailing Address 116 PINE ST.		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	RICHLAND CENTER	WI	53581-9204
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: SA11.13935949
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="1.00"/>
		<input type="text" value="238.00"/>	CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MR. MATTHEW J. ZENTNER		Date of Receipt
	Mailing Address 116 PINE ST.		<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	RICHLAND CENTER	WI	53581-9204
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: SA11.13949338
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="40.00"/>
		<input type="text" value="238.00"/>	CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="71.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2489 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. JAY ZERFOSS	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 2500 SOUTH CT	Transaction ID: SA11.13942869
	City PALO ALTO State CA Zip Code 94301-4240	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) MR. EARL R. ZESCH	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 265 PARKLAND AVENUE	Transaction ID: SA11.13953561
	City SAINT LOUIS State MO Zip Code 63122-4709	Amount of Each Receipt this Period 26.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 226.00	

C.	Full Name (Last, First, Middle Initial) MR. ZI ZHANG	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 3543 88TH ST 2ND FL	Transaction ID: SA11.13954114
	City JACKSON HEIGHTS State NY Zip Code 11372-5641	Amount of Each Receipt this Period 160.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional)	236.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2490 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. ANNA F. ZIEGER

Mailing Address 735 SUSQUEHANNA RD APT F18

City State Zip Code
FORT WASHINGTON PA 19034-3510

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 771.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13941592

Amount of Each Receipt this Period
51.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MILTON A. ZIMMERMAN

Mailing Address 210 WOODSIDE DRIVE

City State Zip Code
LUMBERTON NJ 08048-5278

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949764

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. VERONICA E. ZIMMERMAN

Mailing Address 222 HERITAGE RD APT 114
APARTMENT 114

City State Zip Code
GUILDERLAND NY 12084-9671

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 511.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13930540

Amount of Each Receipt this Period
20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **171.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2491 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. VERONICA E. ZIMMERMAN

Mailing Address 222 HERITAGE RD APT 114
APARTMENT 114

City State Zip Code
GUILDERLAND NY 12084-9671

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 511.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13949459

Amount of Each Receipt this Period
20.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. VERONICA E. ZIMMERMAN

Mailing Address 222 HERITAGE RD APT 114
APARTMENT 114

City State Zip Code
GUILDERLAND NY 12084-9671

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 511.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950318

Amount of Each Receipt this Period
20.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DARTON J. ZINK

Mailing Address 22151 EAST 91ST STREET

City State Zip Code
BROKEN ARROW OK 74014-3250

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ZEECO, INC. PRESIDENT & CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13966030

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1040.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2492 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
STEPHEN ZINKGRAF

Mailing Address 221 DEER TRAIL

City State Zip Code
SAN MARCOS TX 78666-8935

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 660.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13948217

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. R. B. ZINSER

Mailing Address 3158 ORLEANS E.

City State Zip Code
SAN DIEGO CA 92110-5946

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13950283

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT B. ZINSER

Mailing Address 3158 ORLEANS E

City State Zip Code
SAN DIEGO CA 92110-5946

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13969171

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **600.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2493 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. SANDRA M. ZIRNGIBL
 Mailing Address 1690 AMARILLO STREET NW
 City NORTH CANTON State OH Zip Code 44720-6171
 Date of Receipt 10 / 28 / 2010
Transaction ID: SA11.13957715
 Amount of Each Receipt this Period 110.00
 CONTRIBUTION
 FEC ID number of contributing federal political committee. C
 Name of Employer HOMEMAKER Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

B. Full Name (Last, First, Middle Initial)
MRS. JANE S. ZIRNKILTON
 Mailing Address P.O. BOX 127
 City SEAL HARBOR State ME Zip Code 04675-0127
 Date of Receipt 11 / 02 / 2010
Transaction ID: SA11.13964777
 Amount of Each Receipt this Period 500.00
 CONTRIBUTION
 FEC ID number of contributing federal political committee. C
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

C. Full Name (Last, First, Middle Initial)
MS. JOYCE B. ZITZOW
 Mailing Address 18808 WHIRLAWAY ROAD
 City EAGLE RIVER State AK Zip Code 99577-7200
 Date of Receipt 10 / 14 / 2010
Transaction ID: SA11.13930673
 Amount of Each Receipt this Period 25.00
 CONTRIBUTION
 FEC ID number of contributing federal political committee. C
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 301.00

SUBTOTAL of Receipts This Page (optional) ► 635.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2494 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. JOYCE B. ZITZOW

Mailing Address 18808 WHIRLWAY ROAD

City State Zip Code
EAGLE RIVER AK 99577-7200

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt
MM / DD / YYYY
11 / 05 / 2010

Transaction ID: SA11.13966155

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. PATRICIA H. ZLOTUCHA

Mailing Address P.O. BOX 281

City State Zip Code
JOHNSON VT 05656-0281

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13947104

Amount of Each Receipt this Period
35.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RAY L. ZOBEL

Mailing Address 36727 S OCOTILLO CANYON DR.

City State Zip Code
TUCSON AZ 85739-2291

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 291.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11.13933139

Amount of Each Receipt this Period
51.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **111.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2495 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RAY L. ZOBEL

Mailing Address 36727 S OCOTILLO CANYON DR.

City TUCSON State AZ Zip Code 85739-2291

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 291.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13951852
 Amount of Each Receipt this Period: 50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RAY L. ZOBEL

Mailing Address 36727 S OCOTILLO CANYON DR.

City TUCSON State AZ Zip Code 85739-2291

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 291.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13954165
 Amount of Each Receipt this Period: 100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RAY L. ZOBEL

Mailing Address 36727 S OCOTILLO CANYON DR.

City TUCSON State AZ Zip Code 85739-2291

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 291.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13956894
 Amount of Each Receipt this Period: 25.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 175.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2496 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. KENNETH M. ZOELLER		Date of Receipt
	Mailing Address 65792 702 RD		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	FALLS CITY	NE	68355-2444
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer SELF-EMPLOYED		Occupation FARMER	Transaction ID: SA11.13956160
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="285.00"/>	Amount of Each Receipt this Period <input type="text" value="50.00"/>
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) MR. ERIC ZORN		Date of Receipt
	Mailing Address 10 ST. ANDREWS DR.		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	ROGERS	AR	72758-1466
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer WALMART REALTY COMPANY		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.13966050
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	Amount of Each Receipt this Period <input type="text" value="1000.00"/>
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) SCOTT ZORTMAN		Date of Receipt
	Mailing Address 907 LENOX WAY		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	ATLANTA	GA	30324-2870
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer MILLENNIUM 12 CHEMICALS		Occupation SALES	Transaction ID: SA11.13932158
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="325.00"/>	Amount of Each Receipt this Period <input type="text" value="75.00"/>
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1125.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2497 / 3187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. DONALD ZUCKER

Mailing Address 101 W 55TH STREET

City State Zip Code
NEW YORK NY 10019-5343

FEC ID number of contributing federal political committee. **C**

Name of Employer DONALD ZUCKER COMPANY Occupation CHAIRMAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13951174
Amount of Each Receipt this Period: 5000.00
CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
CHRISTINE ZUNDRITSCH

Mailing Address 4610 61ST. ST. APT. 4D

City State Zip Code
WOODSIDE NY 11377-5719

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 10 / 14 / 2010
Transaction ID: SA11.13931080
Amount of Each Receipt this Period: 80.00
CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
CHRISTINE ZUNDRITSCH

Mailing Address 4610 61ST. ST. APT. 4D

City State Zip Code
WOODSIDE NY 11377-5719

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11.13940059
Amount of Each Receipt this Period: 80.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **5160.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2498 / 3187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CHRISTINE ZUNDRITSCH		Date of Receipt
	Mailing Address 4610 61ST. ST. APT. 4D		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 19 / 2010
	City	State	Zip Code
	WOODSIDE	NY	11377-5719
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13940802
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Amount of Each Receipt this Period	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 60.00	
Occupation INFORMATION REQUESTED PER BEST EFFORTS		CONTRIBUTION	
Aggregate Year-to-Date ▼		<input type="text"/> 400.00	

B.	Full Name (Last, First, Middle Initial) BREWSTER/JORY ASSOCIATES, LLC		Date of Receipt
	Mailing Address 499 SOUTH CAPITOL STREET, SW SUITE 608		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 27 / 2010
	City	State	Zip Code
	WASHINGTON	DC	20003-4049
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13959354
Name of Employer		Amount of Each Receipt this Period	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 5000.00	
Occupation		CONTRIBUTION	
Aggregate Year-to-Date ▼		ATTRIBUTION TO PARTNERS REQUESTED	

C.	Full Name (Last, First, Middle Initial) FOOD DIRECTIONS, LLC		Date of Receipt
	Mailing Address 4806 WESTARD VIEW ROAD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 03 / 2010
	City	State	Zip Code
	SHADY SIDE	MD	20764-2700
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13966021
Name of Employer		Amount of Each Receipt this Period	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 1000.00	
Occupation		CONTRIBUTION	
Aggregate Year-to-Date ▼		ATTRIBUTION TO PARTNERS REQUESTED	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 6060.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2499 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
GREENSPRING ASSOCIATES,LLC

Mailing Address 100 PAINTERS MILL ROAD

City State Zip Code
FOREST HILL MD 21117-4915

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13961260

Amount of Each Receipt this Period
3000.00

CONTRIBUTION

ATtribution TO PARTNERS REQUESTED

B. Full Name (Last, First, Middle Initial)
JAWA, LLC

Mailing Address 15111 NORTH PIMA ROAD
SUITE 200

City State Zip Code
SCOTTSDALE AZ 85260-2779

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 25000.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13932368

Amount of Each Receipt this Period
25000.00

CONTRIBUTION

ATtribution TO PARTNERS REQUESTED

C. Full Name (Last, First, Middle Initial)
OSAGE NATION

Mailing Address 627 GRANDVIEW AVENUE

City State Zip Code
PAWHUSKA OK 74056-4201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 7500.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 1 / 0 4 / 2 0 1 0

Transaction ID: SA11.13966038

Amount of Each Receipt this Period
7500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **35500.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2500 / 3187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
REDDING RANCHERIA ECONOMIC DEV., LLC

Mailing Address 2000 REDDING RANCHERIA RD.

City	State	Zip Code
REDDING	CA	96001-5528

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation

Receipt For:

Primary General

Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	1	0

Transaction ID: SA11.13951139

Amount of Each Receipt this Period

2400.00

CONTRIBUTION

ATtribution TO PARTNERS
REQUESTED

SUBTOTAL of Receipts This Page (optional)	▶	2400.00
TOTAL This Period (last page this line number only)	▶	3189252.68

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2501 / 3187
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
CONNECTICUT REPUBLICANS- FEDERAL

Mailing Address 321 ELLIS STREET
BUILDING 17, UNIT 501

City State Zip Code
NEW BRITAIN CT 06051-3504

FEC ID number of contributing federal political committee. **C** C00023838

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13957982

Amount of Each Receipt this Period
10000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	▶	10000.00
TOTAL This Period (last page this line number only)	▶	10000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2502 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
BILIRAKIS FOR CONGRESS

Mailing Address PO BOX 606

City State Zip Code
TARPON SPRINGS FL 34688-0606

FEC ID number of contributing federal political committee. **C** C00408534

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
199000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13945270

Amount of Each Receipt this Period
8000.00

TRANSFER

B.

Full Name (Last, First, Middle Initial)
BILL CASSIDY FOR CONGRESS

Mailing Address 8550 UNITED PLAZA BLVD.
SUITE 1001

City State Zip Code
BATON ROUGE LA 70809-2256

FEC ID number of contributing federal political committee. **C** C00451807

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13942489

Amount of Each Receipt this Period
100000.00

TRANSFER

C.

Full Name (Last, First, Middle Initial)
BILL SHUSTER FOR CONGRESS

Mailing Address PO BOX 27

City State Zip Code
HOLLIDAYSBURG PA 16648-0027

FEC ID number of contributing federal political committee. **C** C00364935

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
53000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13951170

Amount of Each Receipt this Period
50000.00

TRANSFER

SUBTOTAL of Receipts This Page (optional)

158000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2503 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
BRIAN BILBRAY FOR CONGRESS
Mailing Address 970 SEACOAST DRIVE #7
City Imperial Beach State CA Zip Code 91932-2402
FEC ID number of contributing federal political committee. **C** C00300830
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 114100.00
Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13951166
Amount of Each Receipt this Period 32200.00
TRANSFER

B. Full Name (Last, First, Middle Initial)
BUCK MCKEON FOR CONGRESS
Mailing Address 23942 LYONS AVENUE SUITE 105
City Santa Clarita State CA Zip Code 91321-2428
FEC ID number of contributing federal political committee. **C** C00258244
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 382800.00
Date of Receipt 10 / 26 / 2010
Transaction ID: SA11.13957914
Amount of Each Receipt this Period 15000.00
TRANSFER

C. Full Name (Last, First, Middle Initial)
BUCK MCKEON FOR CONGRESS
Mailing Address 23942 LYONS AVENUE SUITE 105
City Santa Clarita State CA Zip Code 91321-2428
FEC ID number of contributing federal political committee. **C** C00258244
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 382800.00
Date of Receipt 10 / 28 / 2010
Transaction ID: SA11.13961187
Amount of Each Receipt this Period 20000.00
TRANSFER

SUBTOTAL of Receipts This Page (optional) ▶ 67200.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2504 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) CANDICE MILLER FOR CONGRESS</p> <p>Mailing Address 28840 OLD NORTH RIVER ROAD</p> <p>City State Zip Code HARRISON TOWNSHIP MI 48045-1622</p> <p>FEC ID number of contributing federal political committee. C C00365593</p> <p>Name of Employer Occupation</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 320000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 1 0</p> <p>Transaction ID: SA11.13932367</p> <p>Amount of Each Receipt this Period 100000.00</p> <p>TRANSFER</p>
<p>B. Full Name (Last, First, Middle Initial) CATHY MCMORRIS FOR CONGRESS</p> <p>Mailing Address P.O. BOX 137</p> <p>City State Zip Code SPOKANE WA 99210-0137</p> <p>FEC ID number of contributing federal political committee. C C00390476</p> <p>Name of Employer Occupation</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 200000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 1 0</p> <p>Transaction ID: SA11.13942478</p> <p>Amount of Each Receipt this Period 100000.00</p> <p>TRANSFER</p>
<p>C. Full Name (Last, First, Middle Initial) CHARLES BOUSTANY JR. M.D. FOR CONGRESS INC.</p> <p>Mailing Address P.O. BOX 80126</p> <p>City State Zip Code LAFAYETTE LA 70598-0126</p> <p>FEC ID number of contributing federal political committee. C C00394866</p> <p>Name of Employer Occupation</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 340000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 2 / 2 0 1 0</p> <p>Transaction ID: SA11.13951172</p> <p>Amount of Each Receipt this Period 50000.00</p> <p>TRANSFER</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>250000.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2505 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CHARLIE DENT FOR CONGRESS		Date of Receipt
	Mailing Address P.O. BOX 442		<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	ALLENTOWN	PA	18105-0442
	FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00386847"/>	Transaction ID: SA11.13951171
Name of Employer	Occupation	Amount of Each Receipt this Period	
		<input type="text" value="15000.00"/>	
Receipt For:	Aggregate Year-to-Date ▼	TRANSFER	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="94508.50"/>		

B.	Full Name (Last, First, Middle Initial) CHARLIE DENT FOR CONGRESS		Date of Receipt
	Mailing Address P.O. BOX 442		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	ALLENTOWN	PA	18105-0442
	FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00386847"/>	Transaction ID: SA11.13957912
Name of Employer	Occupation	Amount of Each Receipt this Period	
		<input type="text" value="20000.00"/>	
Receipt For:	Aggregate Year-to-Date ▼	TRANSFER	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="94508.50"/>		

C.	Full Name (Last, First, Middle Initial) CHARLIE DENT FOR CONGRESS		Date of Receipt
	Mailing Address P.O. BOX 442		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	ALLENTOWN	PA	18105-0442
	FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00386847"/>	Transaction ID: SA11.13961188
Name of Employer	Occupation	Amount of Each Receipt this Period	
		<input type="text" value="12500.00"/>	
Receipt For:	Aggregate Year-to-Date ▼	TRANSFER	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="94508.50"/>		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="47500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2506 / 3187

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
CITIZEN TO ELECT PHIL ROE TO CONGRESS

Mailing Address PO BOX 3218

City State Zip Code
JOHNSON CITY TN 37602-3218

FEC ID number of contributing federal political committee. **C** C00444471

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9000.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13966036

Amount of Each Receipt this Period

9000.00

TRANSFER

B.

Full Name (Last, First, Middle Initial)
COMMITTEE TO RE-ELECT RON PAUL

Mailing Address 837 W. PLANTATION DRIVE

City State Zip Code
CLUTE TX 77531-5224

FEC ID number of contributing federal political committee. **C** C00305342

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
85000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13942474

Amount of Each Receipt this Period

10000.00

TRANSFER

C.

Full Name (Last, First, Middle Initial)
COMMITTEE TO RE-ELECT CONGRESSMAN CHRIS SMITH

Mailing Address PO BOX 3184

City State Zip Code
HAMILTON NJ 08619-0184

FEC ID number of contributing federal political committee. **C** C00096412

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13951159

Amount of Each Receipt this Period

25000.00

TRANSFER

SUBTOTAL of Receipts This Page (optional) ▶

44000.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2507 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
COMMITTEE TO RE-ELECT CONGRESSMAN DANA ROHRBACHER
 Mailing Address P.O. BOX 823
 City State Zip Code
 HUNTINGTON BEACH CA 92648-0823
 FEC ID number of contributing federal political committee. **C** C00224691
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 69500.00
 Date of Receipt: M M / D D / Y Y Y Y Y
 1 0 / 2 6 / 2 0 1 0
Transaction ID: SA11.13957910
 Amount of Each Receipt this Period: 59500.00
 TRANSFER

B. Full Name (Last, First, Middle Initial)
COMMITTEE TO RE-ELECT TRENT FRANKS TO CONGRESS
 Mailing Address P.O. BOX 8105
 City State Zip Code
 GLENDALE AZ 85312-8105
 FEC ID number of contributing federal political committee. **C** C00367110
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 124721.99
 Date of Receipt: M M / D D / Y Y Y Y Y
 1 0 / 2 7 / 2 0 1 0
Transaction ID: SA11.13959366
 Amount of Each Receipt this Period: 30000.00
 TRANSFER

C. Full Name (Last, First, Middle Initial)
CONGRESSMAN JOE BARTON COMMITTEE
 Mailing Address P.O. BOX 1444
 City State Zip Code
 ENNIS TX 75120-1444
 FEC ID number of contributing federal political committee. **C** C00195065
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350000.00
 Date of Receipt: M M / D D / Y Y Y Y Y
 1 0 / 2 2 / 2 0 1 0
Transaction ID: SA11.13951162
 Amount of Each Receipt this Period: 150000.00
 TRANSFER

SUBTOTAL of Receipts This Page (optional) ► 239500.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2508 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
CRENSHAW FOR CONGRESS CAMPAIGN

Mailing Address 4963 BEACH BLVD.
SUTE 1

City Jacksonville State FL Zip Code 32207-4802

FEC ID number of contributing federal political committee. **C** C00352849

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 130000.00

Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13951161
 Amount of Each Receipt this Period 70000.00
 TRANSFER

B. Full Name (Last, First, Middle Initial)
FAMILIES FOR JAMES LANKFORD

Mailing Address PO BOX 721789

City Oklahoma City State OK Zip Code 73172-1789

FEC ID number of contributing federal political committee. **C** C00466482

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13942493
 Amount of Each Receipt this Period 5000.00
 TRANSFER

C. Full Name (Last, First, Middle Initial)
FRELINGHUYSEN FOR CONGRESS

Mailing Address 19 CATTANO AVENUE

City Morristown State NJ Zip Code 07960-6839

FEC ID number of contributing federal political committee. **C** C00148684

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325000.00

Date of Receipt 11 / 19 / 2010
Transaction ID: SA11.13972721
 Amount of Each Receipt this Period 105000.00
 TRANSFER

SUBTOTAL of Receipts This Page (optional) ▶

180000.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2509 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
FRIENDS OF CONNIE MACK

Mailing Address P.O. BOX 65075

City State Zip Code
WASHINGTON DC 20035-5075

FEC ID number of contributing federal political committee. **C** C00391243

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
90000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13932365

Amount of Each Receipt this Period

40000.00

TRANSFER

B.

Full Name (Last, First, Middle Initial)
FRIENDS OF JOHN BOEHNER

Mailing Address 7908 CINCINNATI DAYTON ROAD
SUITE 1-2

City State Zip Code
WEST CHESTER OH 45069-6602

FEC ID number of contributing federal political committee. **C** C00237198

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3145000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13942486

Amount of Each Receipt this Period

500000.00

TRANSFER

C.

Full Name (Last, First, Middle Initial)
FRIENDS OF JOE PITTS

Mailing Address P.O. BOX 775

City State Zip Code
UNIONVILLE PA 19375-0775

FEC ID number of contributing federal political committee. **C** C00310136

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
127250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13942490

Amount of Each Receipt this Period

10000.00

TRANSFER

SUBTOTAL of Receipts This Page (optional)

550000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2510 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
FRIENDS OF JOE PITTS
Mailing Address P.O. BOX 775
City UNIONVILLE State PA Zip Code 19375-0775
FEC ID number of contributing federal political committee. **C** C00310136
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 127250.00
Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13942491
Amount of Each Receipt this Period 60000.00
TRANSFER

B. Full Name (Last, First, Middle Initial)
FRIENDS OF ERIK PAULSEN
Mailing Address P.O. BOX 44369
City EDEN PRAIRIE State MN Zip Code 55344-1369
FEC ID number of contributing federal political committee. **C** C00439661
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00
Date of Receipt 10 / 20 / 2010
Transaction ID: SA11.13945269
Amount of Each Receipt this Period 5000.00
TRANSFER

C. Full Name (Last, First, Middle Initial)
FRIENDS OF CLIFF STEARNS
Mailing Address PO BOX 308
City SILVER SPRINGS State FL Zip Code 34489-0308
FEC ID number of contributing federal political committee. **C** C00229377
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 553200.00
Date of Receipt 10 / 22 / 2010
Transaction ID: SA11.13951160
Amount of Each Receipt this Period 35000.00
TRANSFER

SUBTOTAL of Receipts This Page (optional) ► 100000.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2511 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
FRIENDS OF CLIFF STEARNS

Mailing Address PO BOX 308

City State Zip Code
SILVER SPRINGS FL 34489-0308

FEC ID number of contributing federal political committee. **C** C00229377

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
553200.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13951164

Amount of Each Receipt this Period

250000.00

TRANSFER

B.

Full Name (Last, First, Middle Initial)
FRIENDS OF JOE PITTS

Mailing Address P.O. BOX 775

City State Zip Code
UNIONVILLE PA 19375-0775

FEC ID number of contributing federal political committee. **C** C00310136

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
127250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13957941

Amount of Each Receipt this Period

17250.00

TRANSFER

C.

Full Name (Last, First, Middle Initial)
FRIENDS OF GLENN THOMPSON

Mailing Address P.O. BOX 1066

City State Zip Code
LEWISTOWN PA 17044-1066

FEC ID number of contributing federal political committee. **C** C00444620

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
111600.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13961189

Amount of Each Receipt this Period

25000.00

TRANSFER

SUBTOTAL of Receipts This Page (optional)

292250.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 2512 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
FRIENDS OF JOHN BOEHNER

Mailing Address 7908 CINCINNATI DAYTON ROAD
SUITE 1-2

City State Zip Code
WEST CHESTER OH 45069-6602

FEC ID number of contributing federal political committee. **C** C00237198

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3145000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	1	0

Transaction ID: SA11.13966020

Amount of Each Receipt this Period
845000.00

TRANSFER

B. Full Name (Last, First, Middle Initial)
FRIENDS OF JEB HENSARLING

Mailing Address P.O. BOX 820504

City State Zip Code
DALLAS TX 75382-0504

FEC ID number of contributing federal political committee. **C** C00370650

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
647000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	7	/	2	0	1	0

Transaction ID: SA11.13970895

Amount of Each Receipt this Period
85000.00

TRANSFER

C. Full Name (Last, First, Middle Initial)
GALLEGLY FOR CONGRESS

Mailing Address P.O. BOX 940001

City State Zip Code
SIMI VALLEY CA 93094-0001

FEC ID number of contributing federal political committee. **C** C00194803

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
90000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	1	0

Transaction ID: SA11.13948211

Amount of Each Receipt this Period
90000.00

TRANSFER

SUBTOTAL of Receipts This Page (optional) ► **1020000.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2513 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
GARY MILLER FOR CONGRESS

Mailing Address 721 BREA CANYON ROAD
SUITE 7

City State Zip Code
WALNUT CA 91789-3039

FEC ID number of contributing federal political committee. **C** C00331496

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 171400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13945268

Amount of Each Receipt this Period

44400.00

TRANSFER

B.

Full Name (Last, First, Middle Initial)
GARY MILLER FOR CONGRESS

Mailing Address 721 BREA CANYON ROAD
SUITE 7

City State Zip Code
WALNUT CA 91789-3039

FEC ID number of contributing federal political committee. **C** C00331496

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 171400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961243

Amount of Each Receipt this Period

40000.00

TRANSFER

C.

Full Name (Last, First, Middle Initial)
GINGREY FOR CONGRESS

Mailing Address P.O. BOX U

City State Zip Code
MARIETTA GA 30061-1077

FEC ID number of contributing federal political committee. **C** C00370783

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 154500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 1 0

Transaction ID: SA11.13966046

Amount of Each Receipt this Period

1500.00

TRANSFER

SUBTOTAL of Receipts This Page (optional)

85900.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2514 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
GRAVES FOR CONGRESS

Mailing Address 2345 GRAND BLVD.
SUITE 2400

City State Zip Code
KANSAS CITY MO 64108-2642

FEC ID number of contributing federal political committee. **C** C00359034

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220234.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13945265

Amount of Each Receipt this Period
50000.00

TRANSFER

B. Full Name (Last, First, Middle Initial)
GRAVES FOR CONGRESS

Mailing Address 2345 GRAND BLVD.
SUITE 2400

City State Zip Code
KANSAS CITY MO 64108-2642

FEC ID number of contributing federal political committee. **C** C00359034

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220234.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13961184

Amount of Each Receipt this Period
35234.00

TRANSFER

C. Full Name (Last, First, Middle Initial)
HOOSIERS SUPPORTING BUYER FOR CONGRESS

Mailing Address 200 N. MAIN STREET
P.O. BOX 712

City State Zip Code
MONTICELLO IN 47960-2131

FEC ID number of contributing federal political committee. **C** C00255471

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
28000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13942487

Amount of Each Receipt this Period
28000.00

TRANSFER

SUBTOTAL of Receipts This Page (optional) ► **113234.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2515 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
HUIZENGA FOR CONGRESS

Mailing Address PO BOX 254

City State Zip Code
ZEELAND MI 49464-0254

FEC ID number of contributing federal political committee. **C** C00459297

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 35000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13942482

Amount of Each Receipt this Period

10000.00

TRANSFER

B.

Full Name (Last, First, Middle Initial)
HUIZENGA FOR CONGRESS

Mailing Address PO BOX 254

City State Zip Code
ZEELAND MI 49464-0254

FEC ID number of contributing federal political committee. **C** C00459297

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 35000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13961190

Amount of Each Receipt this Period

25000.00

TRANSFER

C.

Full Name (Last, First, Middle Initial)
ISSA FOR CONGRESS

Mailing Address P.O. BOX 760

City State Zip Code
VISTA CA 92085-0760

FEC ID number of contributing federal political committee. **C** C00350520

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 95000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13961183

Amount of Each Receipt this Period

10000.00

TRANSFER

SUBTOTAL of Receipts This Page (optional) ►

45000.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2516 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JEFF FLAKE FOR CONGRESS
Mailing Address P.O. BOX 21447

City MESA State AZ Zip Code 85277-1447

FEC ID number of contributing federal political committee. **C** C00347260

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 60000.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11.13951168
 Amount of Each Receipt this Period: 30000.00
 TRANSFER

B. Full Name (Last, First, Middle Initial)
JEFF MILLER FOR CONGRESS
Mailing Address 610 S. BOULEVARD

City TAMPA State FL Zip Code 33606-2693

FEC ID number of contributing federal political committee. **C** C00366757

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 244600.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13957944
 Amount of Each Receipt this Period: 28500.00
 TRANSFER

C. Full Name (Last, First, Middle Initial)
JIM GERLACH FOR CONGRESS
Mailing Address P.O. BOX 87

City UWCHLAND State PA Zip Code 19480-0087

FEC ID number of contributing federal political committee. **C** C00372102

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 155600.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13957911
 Amount of Each Receipt this Period: 25000.00
 TRANSFER

SUBTOTAL of Receipts This Page (optional) ► 83500.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2517 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JIM GERLACH FOR CONGRESS
Mailing Address P.O. BOX 87
City State Zip Code
UWCHLAND PA 19480-0087
FEC ID number of contributing federal political committee. **C** C00372102
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 155600.00
Date of Receipt MM / DD / YYYY 11 / 17 / 2010
Transaction ID: SA11.13970894
Amount of Each Receipt this Period 31600.00
TRANSFER

B. Full Name (Last, First, Middle Initial)
JO BONNER FOR CONGRESS COMMITTEE
Mailing Address P.O. BOX 851232
City State Zip Code
MOBILE AL 36685-1232
FEC ID number of contributing federal political committee. **C** C00375220
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 176300.00
Date of Receipt MM / DD / YYYY 10 / 22 / 2010
Transaction ID: SA11.13951167
Amount of Each Receipt this Period 48300.00
TRANSFER

C. Full Name (Last, First, Middle Initial)
JOHN CAMPBELL FOR CONGRESS
Mailing Address 4590 MACARTHUR BLVD STE 500
City State Zip Code
NEWPORT BEACH CA 92660-2028
FEC ID number of contributing federal political committee. **C** C00412312
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 140000.00
Date of Receipt MM / DD / YYYY 10 / 18 / 2010
Transaction ID: SA11.13942480
Amount of Each Receipt this Period 35000.00
TRANSFER

SUBTOTAL of Receipts This Page (optional) ► 114900.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2518 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JUDY BIGGERT FOR CONGRESS
Mailing Address P.O. BOX 637

City State Zip Code
HINSDALE IL 60522-0637

FEC ID number of contributing federal political committee. **C** C00330241

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13942475
 Amount of Each Receipt this Period
 200000.00
 TRANSFER

B. Full Name (Last, First, Middle Initial)
JUDY BIGGERT FOR CONGRESS
Mailing Address P.O. BOX 637

City State Zip Code
HINSDALE IL 60522-0637

FEC ID number of contributing federal political committee. **C** C00330241

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	9	/	2	0	1	0

Transaction ID: SA11.13961241
 Amount of Each Receipt this Period
 50000.00
 TRANSFER

C. Full Name (Last, First, Middle Initial)
KEN CALVERT FOR CONGRESS COMMITTEE
Mailing Address P.O. BOX 20123

City State Zip Code
RIVERSIDE CA 92516-0123

FEC ID number of contributing federal political committee. **C** C00257337

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
27040.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	9	/	2	0	1	0

Transaction ID: SA11.13961242
 Amount of Each Receipt this Period
 25000.00
 TRANSFER

SUBTOTAL of Receipts This Page (optional) ► **275000.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2519 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
KEN MARCHANT FOR CONGRESS
Mailing Address P.O. BOX 110187
City CARROLLTON State TX Zip Code 75011-0187
FEC ID number of contributing federal political committee. **C** C00393348
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 81750.00
Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13957909
Amount of Each Receipt this Period: 25000.00
TRANSFER

B. Full Name (Last, First, Middle Initial)
KEN MARCHANT FOR CONGRESS
Mailing Address P.O. BOX 110187
City CARROLLTON State TX Zip Code 75011-0187
FEC ID number of contributing federal political committee. **C** C00393348
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 81750.00
Date of Receipt: 10 / 29 / 2010
Transaction ID: SA11.13961246
Amount of Each Receipt this Period: 15000.00
TRANSFER

C. Full Name (Last, First, Middle Initial)
KEVIN MCCARTHY FOR CONGRESS
Mailing Address P.O. BOX 12667
City BAKERSFIELD State CA Zip Code 93389-2667
FEC ID number of contributing federal political committee. **C** C00420935
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 668000.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13957943
Amount of Each Receipt this Period: 50000.00
TRANSFER

SUBTOTAL of Receipts This Page (optional) ► 90000.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2520 / 3187

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
KING FOR CONGRESS

Mailing Address P.O. BOX 400

City State Zip Code
EARLY IA 50535-0400

FEC ID number of contributing federal political committee. **C** C00373563

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
75000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13932247

Amount of Each Receipt this Period

40000.00

TRANSFER

B.

Full Name (Last, First, Middle Initial)
KLINE FOR CONGRESS

Mailing Address 101 W. BURNSVILLE PARKWAY
SUITE 104

City State Zip Code
BURNSVILLE MN 55337-2571

FEC ID number of contributing federal political committee. **C** C00326629

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300800.47

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13942488

Amount of Each Receipt this Period

85000.00

TRANSFER

C.

Full Name (Last, First, Middle Initial)
KLINE FOR CONGRESS

Mailing Address 101 W. BURNSVILLE PARKWAY
SUITE 104

City State Zip Code
BURNSVILLE MN 55337-2571

FEC ID number of contributing federal political committee. **C** C00326629

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300800.47

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 1 0

Transaction ID: SA11.13967221

Amount of Each Receipt this Period

10000.00

TRANSFER

SUBTOTAL of Receipts This Page (optional)

135000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2521 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
LANCE FOR CONGRESS

Mailing Address P.O. BOX 225

City COLONIA State NJ Zip Code 07067-0225

FEC ID number of contributing federal political committee. **C** C00444224

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 115000.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11.13957913
Amount of Each Receipt this Period: 35000.00
TRANSFER

B. Full Name (Last, First, Middle Initial)
LATHAM FOR CONGRESS

Mailing Address P.O. BOX 71

City CLARION State IA Zip Code 50525-0071

FEC ID number of contributing federal political committee. **C** C00287045

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 137500.00

Date of Receipt: 10 / 27 / 2010
Transaction ID: SA11.13959363
Amount of Each Receipt this Period: 8200.00
TRANSFER

C. Full Name (Last, First, Middle Initial)
LATTA FOR CONGRESS

Mailing Address 300 N. MAIN STREET

City BOWLING GREEN State OH Zip Code 43402-2423

FEC ID number of contributing federal political committee. **C** C00438697

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 47500.00

Date of Receipt: 10 / 28 / 2010
Transaction ID: SA11.13961191
Amount of Each Receipt this Period: 2500.00
TRANSFER

SUBTOTAL of Receipts This Page (optional) ► 45700.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2522 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
LOBIONDO FOR CONGRESS
Mailing Address P.O. BOX 775

City State Zip Code
MARMORA NJ 08223-0775

FEC ID number of contributing federal political committee. **C** C00269340

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13951163

Amount of Each Receipt this Period
50000.00

TRANSFER

B. Full Name (Last, First, Middle Initial)
LUCAS FOR CONGRESS COMMITTEE
Mailing Address P.O. BOX 1726

City State Zip Code
OKLAHOMA CITY OK 73101-1726

FEC ID number of contributing federal political committee. **C** C00287912

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
379500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961240

Amount of Each Receipt this Period
13000.00

TRANSFER

C. Full Name (Last, First, Middle Initial)
MANZULLO FOR CONGRESS
Mailing Address P.O. BOX 7783

City State Zip Code
ROCKFORD IL 61126-7783

FEC ID number of contributing federal political committee. **C** C00252973

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125000.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 4 / 2 0 1 0

Transaction ID: SA11.13966041

Amount of Each Receipt this Period
25000.00

TRANSFER

SUBTOTAL of Receipts This Page (optional) ► **88000.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2523 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MANZULLO FOR CONGRESS

Mailing Address P.O. BOX 7783

City State Zip Code
ROCKFORD IL 61126-7783

FEC ID number of contributing federal political committee. **C** C00252973

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Transaction ID: SA11.13968713

Amount of Each Receipt this Period
25000.00

TRANSFER

B. Full Name (Last, First, Middle Initial)
MARSHA BLACKBURN FOR CONGRESS INC.

Mailing Address PO BOX 682185

City State Zip Code
FRANKLIN TN 37068-2185

FEC ID number of contributing federal political committee. **C** C00376939

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
110000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13942477

Amount of Each Receipt this Period
50000.00

TRANSFER

C. Full Name (Last, First, Middle Initial)
MCHENRY FOR CONGRESS

Mailing Address PO BOX 1406

City State Zip Code
HICKORY NC 28603-1406

FEC ID number of contributing federal political committee. **C** C00393629

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
48000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 1 0

Transaction ID: SA11.13966047

Amount of Each Receipt this Period
1000.00

TRANSFER

SUBTOTAL of Receipts This Page (optional) ► **76000.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2524 / 3187
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MICA FOR CONGRESS
Mailing Address P.O. BOX 181546

City State Zip Code
CASSELBERRY FL 32718-1546

FEC ID number of contributing federal political committee. **C** C00283051

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330100.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 2 6 / 2 0 1 0
Transaction ID: SA11.13957908
 Amount of Each Receipt this Period
 1100.00
 TRANSFER

B. Full Name (Last, First, Middle Initial)
OLSON FOR CONGRESS COMMITTEE
Mailing Address P.O. BOX 16381

City State Zip Code
SUGAR LAND TX 77496-6381

FEC ID number of contributing federal political committee. **C** C00437913

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
77750.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 1 8 / 2 0 1 0
Transaction ID: SA11.13942481
 Amount of Each Receipt this Period
 20000.00
 TRANSFER

C. Full Name (Last, First, Middle Initial)
OLSON FOR CONGRESS
Mailing Address 16850 DIANA LANE SUITE A.

City State Zip Code
HOUSTON TX 77058

FEC ID number of contributing federal political committee. **C** C00437913

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1342.12

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 2 5 / 2 0 1 0
Transaction ID: SA11C.13977521
 Amount of Each Receipt this Period
 21.91
 TRANSFER
 IN-KIND: SHIPPING

SUBTOTAL of Receipts This Page (optional) ► **21121.91**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2525 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
OLSON FOR CONGRESS

Mailing Address 16850 DIANA LANE SUITE A.

City State Zip Code
HOUSTON TX 77058

FEC ID number of contributing federal political committee. **C** C00437913

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1342.12

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11C.13977522

Amount of Each Receipt this Period

1320.21

TRANSFER

IN-KIND: INVITATIONS AND POSTAGE

B.

Full Name (Last, First, Middle Initial)
PAUL BROUN COMMITTEE

Mailing Address 1221 KNOB CREEK DRIVE

City State Zip Code
ATHENS GA 30606-7040

FEC ID number of contributing federal political committee. **C** C00432955

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 118000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13932366

Amount of Each Receipt this Period

48000.00

TRANSFER

C.

Full Name (Last, First, Middle Initial)
PAUL BROUN COMMITTEE

Mailing Address 1221 KNOB CREEK DRIVE

City State Zip Code
ATHENS GA 30606-7040

FEC ID number of contributing federal political committee. **C** C00432955

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 118000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13961192

Amount of Each Receipt this Period

10000.00

TRANSFER

SUBTOTAL of Receipts This Page (optional) ▶

59320.21

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2526 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
PETE KING FOR CONGRESS COMMITTEE
Mailing Address P.O. BOX 1428

City State Zip Code
SEAFORD NY 11783-0257

FEC ID number of contributing federal political committee. **C** C00272211

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 4 / 2 0 1 0
Transaction ID: SA11.13932246
 Amount of Each Receipt this Period
 50000.00
 TRANSFER

B. Full Name (Last, First, Middle Initial)
PETE KING FOR CONGRESS COMMITTEE
Mailing Address P.O. BOX 1428

City State Zip Code
SEAFORD NY 11783-0257

FEC ID number of contributing federal political committee. **C** C00272211

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 0 / 2 0 1 0
Transaction ID: SA11.13945263
 Amount of Each Receipt this Period
 100000.00
 TRANSFER

C. Full Name (Last, First, Middle Initial)
PRICE FOR CONGRESS
Mailing Address P.O. BOX 425

City State Zip Code
ROSWELL GA 30077-0425

FEC ID number of contributing federal political committee. **C** C00386755

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 150000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 8 / 2 0 1 0
Transaction ID: SA11.13961185
 Amount of Each Receipt this Period
 20000.00
 TRANSFER

SUBTOTAL of Receipts This Page (optional) ► 170000.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2527 / 3187

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

ROB WITTMAN FOR CONGRESS

Mailing Address P.O. BOX 999

City State Zip Code
MONTROSS VA 22520-0999

FEC ID number of contributing federal political committee. **C** C00441014

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
105000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13951165

Amount of Each Receipt this Period

50000.00

TRANSFER

B.

Full Name (Last, First, Middle Initial)

ROBERT ADERHOLT FOR CONGRESS

Mailing Address P.O. BOX 1158

City State Zip Code
HALEYVILLE AL 35565-1158

FEC ID number of contributing federal political committee. **C** C00313247

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
294600.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13965487

Amount of Each Receipt this Period

35000.00

TRANSFER

C.

Full Name (Last, First, Middle Initial)

RODNEY ALEXANDER FOR CONGRESS INC.

Mailing Address 319 NANCYS ROAD

City State Zip Code
QUITMAN LA 71268-1108

FEC ID number of contributing federal political committee. **C** C00376749

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961245

Amount of Each Receipt this Period

80000.00

TRANSFER

SUBTOTAL of Receipts This Page (optional) ▶

165000.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2528 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ROGERS FOR CONGRESS
Mailing Address P.O. BOX 1113

City State Zip Code
ANNISTON AL 36202-1113

FEC ID number of contributing federal political committee. **C** C00367862

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
165600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11.13942476
 Amount of Each Receipt this Period
 50600.00
 TRANSFER

B. Full Name (Last, First, Middle Initial)
ROGERS FOR CONGRESS
Mailing Address P.O. BOX 581

City State Zip Code
BRIGHTON MI 48116-0581

FEC ID number of contributing federal political committee. **C** C00343863

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
128000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	1	0

Transaction ID: SA11.13945266
 Amount of Each Receipt this Period
 100000.00
 TRANSFER

C. Full Name (Last, First, Middle Initial)
ROS-LEHTINEN FOR CONGRESS
Mailing Address PO BOX 522784

City State Zip Code
MIAMI FL 33152-2784

FEC ID number of contributing federal political committee. **C** C00280537

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
71350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	5	/	2	0	1	0

Transaction ID: SA11.13932363
 Amount of Each Receipt this Period
 20000.00
 TRANSFER

SUBTOTAL of Receipts This Page (optional) ► **170600.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2529 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ROS-LEHTINEN FOR CONGRESS

Mailing Address PO BOX 522784

City State Zip Code
MIAMI FL 33152-2784

FEC ID number of contributing federal political committee. **C** C00280537

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
71350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957907

Amount of Each Receipt this Period
1100.00

TRANSFER

B. Full Name (Last, First, Middle Initial)
ROSKAM FOR CONGRESS COMMITTEE

Mailing Address PO BOX 713

City State Zip Code
WHEATON IL 60187-0713

FEC ID number of contributing federal political committee. **C** C00410969

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13959364

Amount of Each Receipt this Period
50000.00

TRANSFER

C. Full Name (Last, First, Middle Initial)
RYAN FOR CONGRESS

Mailing Address P.O. BOX 1919

City State Zip Code
JANESVILLE WI 53547-1919

FEC ID number of contributing federal political committee. **C** C00330894

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
156500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13942479

Amount of Each Receipt this Period
4000.00

TRANSFER

SUBTOTAL of Receipts This Page (optional) ▶ **55100.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2530 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
RYAN FOR CONGRESS
Mailing Address P.O. BOX 1919
City JANESVILLE State WI Zip Code 53547-1919
FEC ID number of contributing federal political committee. **C** C00330894
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 156500.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13957942
Amount of Each Receipt this Period: 2500.00
TRANSFER

B. Full Name (Last, First, Middle Initial)
TED POE FOR CONGRESS
Mailing Address P.O. BOX 14222
City HUMBLE State TX Zip Code 77347-4222
FEC ID number of contributing federal political committee. **C** C00392670
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 199722.00
Date of Receipt: 11 / 04 / 2010
Transaction ID: SA11.13966040
Amount of Each Receipt this Period: 28272.00
TRANSFER

C. Full Name (Last, First, Middle Initial)
TIBERI FOR CONGRESS
Mailing Address 2931 E DUBLIN GRANVILLE RD STE 190
City COLUMBUS State OH Zip Code 43231-2098
FEC ID number of contributing federal political committee. **C** C00347492
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 25000.00
Date of Receipt: 10 / 29 / 2010
Transaction ID: SA11.13961244
Amount of Each Receipt this Period: 25000.00
TRANSFER

SUBTOTAL of Receipts This Page (optional) ► 55772.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2531 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
TIM GRIFFIN FOR CONGRESS COMMITTEE

Mailing Address 11300 CANTRELL ROAD
AUIITE 301

City State Zip Code
LITTLE ROCK AR 72212-1841

FEC ID number of contributing federal political committee. **C** C00468116

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	1	0

Transaction ID: SA11.13942492

Amount of Each Receipt this Period
25000.00

TRANSFER

B. Full Name (Last, First, Middle Initial)
TIM MURPHY FOR CONGRESS

Mailing Address P.O. BOX 24551

City State Zip Code
PITTSBURGH PA 15234-4551

FEC ID number of contributing federal political committee. **C** C00372201

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
274623.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	1	0

Transaction ID: SA11.13951169

Amount of Each Receipt this Period
31000.00

TRANSFER

C. Full Name (Last, First, Middle Initial)
TIM MURPHY FOR CONGRESS

Mailing Address P.O. BOX 24551

City State Zip Code
PITTSBURGH PA 15234-4551

FEC ID number of contributing federal political committee. **C** C00372201

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
274623.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	3	/	2	0	1	0

Transaction ID: SA11.13966035

Amount of Each Receipt this Period
100000.00

TRANSFER

SUBTOTAL of Receipts This Page (optional) ► **156000.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2532 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
TIM SCOTT FOR CONGRESS

Mailing Address 1405 ASHLEY RIVER ROAD

City State Zip Code
CHARLESTON SC 29407-5305

FEC ID number of contributing federal political committee. **C** C00476226

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	4	/	2	0	1	0

Transaction ID: SA11.13966042

Amount of Each Receipt this Period
20000.00

TRANSFER

B. Full Name (Last, First, Middle Initial)
TODD AKIN FOR CONGRESS

Mailing Address P.O. BOX 31222

City State Zip Code
SAINT LOUIS MO 63131-0222

FEC ID number of contributing federal political committee. **C** C00343475

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
101511.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	1	0

Transaction ID: SA11.13961186

Amount of Each Receipt this Period
65300.00

TRANSFER

C. Full Name (Last, First, Middle Initial)
TOM REED FOR CONGRESS

Mailing Address P.O. BOX 94

City State Zip Code
CORNING NY 14830-0094

FEC ID number of contributing federal political committee. **C** C00464032

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
51006.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	1	0

Transaction ID: SA11.13959365

Amount of Each Receipt this Period
50000.00

TRANSFER

SUBTOTAL of Receipts This Page (optional) ► **135300.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2533 / 3187
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
UPTON FOR ALL OF US
Mailing Address P.O. BOX 490

City State Zip Code
SAINT JOSEPH MI 49085-0490

FEC ID number of contributing federal political committee. **C** C00200584

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13932364
Amount of Each Receipt this Period
200000.00
TRANSFER

B. Full Name (Last, First, Middle Initial)
VOLUNTEERS FOR SHIMKUS
Mailing Address P.O. BOX 5458

City State Zip Code
SPRINGFIELD IL 62705-5458

FEC ID number of contributing federal political committee. **C** C00258855

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
342000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13945264
Amount of Each Receipt this Period
100000.00
TRANSFER

C. Full Name (Last, First, Middle Initial)
WALDEN FOR CONGRESS INC.
Mailing Address P.O. BOX 1091

City State Zip Code
HOOD RIVER OR 97031-0037

FEC ID number of contributing federal political committee. **C** C00333427

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
180000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13945267
Amount of Each Receipt this Period
70000.00
TRANSFER

SUBTOTAL of Receipts This Page (optional) ► **370000.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2534 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
WHITFIELD FOR CONGRESS COMMITTEE
Mailing Address P.O. BOX 391

City State Zip Code
HOPKINSVILLE KY 42241-0391

FEC ID number of contributing federal political committee. **C** C00289983

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
221800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	1	0

Transaction ID: SA11.13959362
 Amount of Each Receipt this Period
 35000.00
 TRANSFER

B. Full Name (Last, First, Middle Initial)
WHITFIELD FOR CONGRESS COMMITTEE
Mailing Address P.O. BOX 391

City State Zip Code
HOPKINSVILLE KY 42241-0391

FEC ID number of contributing federal political committee. **C** C00289983

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
221800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	9	/	2	0	1	0

Transaction ID: SA11.13961239
 Amount of Each Receipt this Period
 10000.00
 TRANSFER

C. Full Name (Last, First, Middle Initial)
WOMACK FOR CONGRESS
Mailing Address PO BOX 508

City State Zip Code
ROGERS AR 72757-0508

FEC ID number of contributing federal political committee. **C** C00477745

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	1	0

Transaction ID: SA11.13951173
 Amount of Each Receipt this Period
 50000.00
 TRANSFER

SUBTOTAL of Receipts This Page (optional) ► **95000.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2535 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) ADVOCAT INC. PAC</p> <p>Mailing Address 1621 GALLERIA BLVD.</p> <p>City State Zip Code BRENTWOOD TN 37027-2926</p> <p>FEC ID number of contributing federal political committee. C C00421735</p> <p>Name of Employer Occupation</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 5500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 1 0</p> <p>Transaction ID: SA11.13957939</p> <p>Amount of Each Receipt this Period 2000.00</p> <p>CONTRIBUTION</p>
<p>B. Full Name (Last, First, Middle Initial) ALPHA NATURAL RESOURCES (FOUNDATION COAL) PAC</p> <p>Mailing Address 999 CORPORATE BOULEVARD SUITE 300</p> <p>City State Zip Code LINTHICUM HEIGHTS MD 21090-2271</p> <p>FEC ID number of contributing federal political committee. C C00348524</p> <p>Name of Employer Occupation</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 15000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0</p> <p>Transaction ID: SA11.13961223</p> <p>Amount of Each Receipt this Period 5000.00</p> <p>CONTRIBUTION</p>
<p>C. Full Name (Last, First, Middle Initial) AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS PAC</p> <p>Mailing Address 725 15TH STREET, NW SUITE 500</p> <p>City State Zip Code WASHINGTON DC 20005-2152</p> <p>FEC ID number of contributing federal political committee. C C00413955</p> <p>Name of Employer Occupation</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 10000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 1 0</p> <p>Transaction ID: SA11.13961198</p> <p>Amount of Each Receipt this Period 5000.00</p> <p>CONTRIBUTION</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>12000.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2536 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
AMERICAN GASTROENTEROLOGICAL ASSOCIATION
 Mailing Address 4720 MONTGOMERY LANE
SUITE 430
 City State Zip Code
BETHESDA MD 20814-3441
 FEC ID number of contributing federal political committee. **C** C00423228
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	1	0

 Transaction ID: SA11.13959357
 Amount of Each Receipt this Period
5000.00
 CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
AMERICAN MEAT INSTITUTE PAC
 Mailing Address 1150 CONNECTICUT AVE. NW
12TH FLOOR
 City State Zip Code
WASHINGTON DC 20036-4104
 FEC ID number of contributing federal political committee. **C** C00024281
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
6000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	9	/	2	0	1	0

 Transaction ID: SA11.13967207
 Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
AMERICAN PODIATRIC MEDICAL ASSOCIATION PAC
 Mailing Address 9312 OLD GEORGETOWN ROAD
 City State Zip Code
BETHESDA MD 20814-1621
 FEC ID number of contributing federal political committee. **C** C00008839
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	1	0

 Transaction ID: SA11.13965485
 Amount of Each Receipt this Period
5000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	▶	11000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2537 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
AMERICANS FOR REPUBLICAN LEADERSHIP PAC

Mailing Address PO BOX 225

City State Zip Code
COLONIA NJ 07067-0225

FEC ID number of contributing federal political committee. **C** C00383422

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
13000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.13942483

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
AMERICANS FOR REPUBLICAN LEADERSHIP PAC

Mailing Address PO BOX 225

City State Zip Code
COLONIA NJ 07067-0225

FEC ID number of contributing federal political committee. **C** C00383422

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
13000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11.13957940

Amount of Each Receipt this Period

3000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
ASSOCIATION OF PHYSICIANS OF INDIAN ORIGIN PAC (APIPAC)

Mailing Address 8136 OLD KEENE MILL ROAD
SUITE 300A

City State Zip Code
SPRINGFIELD VA 22152-1853

FEC ID number of contributing federal political committee. **C** C00490573

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13965486

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

14500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2538 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
CALPINE CORPORATION PAC

Mailing Address 1401 H. STREET NW
SUITE 510

City WASHINGTON State DC Zip Code 20005-2024

FEC ID number of contributing federal political committee. **C** C00362640

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 19 / 2010
Transaction ID: SA11.13942517
 Amount of Each Receipt this Period 2000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CAMP DRESSER & MCKEE (CDM NATIONAL) PAC

Mailing Address 1611 N. KENT STREET
SUITE 300

City ARLINGTON State VA Zip Code 22209-2111

FEC ID number of contributing federal political committee. **C** C00398222

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 28 / 2010
Transaction ID: SA11.13961197
 Amount of Each Receipt this Period 10000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CHESAPEAKE ENERGY CORPORATION FED. PAC

Mailing Address PO BOX 18496

City OKLAHOMA CITY State OK Zip Code 73154-0496

FEC ID number of contributing federal political committee. **C** C00389288

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 10 / 20 / 2010
Transaction ID: SA11.13945259
 Amount of Each Receipt this Period 15000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 27000.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2539 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
CITIGROUP INC. PAC - FEDERAL/STATE

Mailing Address 1101 PENNSYLVANIA AVENUE, NW
SUITE 1000

City WASHINGTON State DC Zip Code 20004-2524

FEC ID number of contributing federal political committee. **C** C00039305

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 12500.00

Date of Receipt: 11 / 04 / 2010
Transaction ID: SA11.13966044
Amount of Each Receipt this Period: 5000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
EBAY INC.- COMMITTEE FOR RESPONSIBLE INTERNET COMMERCE

Mailing Address 1250 EYE STREET, NW
SUITE 1002

City WASHINGTON State DC Zip Code 20005-5946

FEC ID number of contributing federal political committee. **C** C00342394

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13976591
Amount of Each Receipt this Period: 5000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
EYE OF THE TIGER PAC

Mailing Address PO BOX 2485

City SPRINGFIELD State VA Zip Code 22152-0485

FEC ID number of contributing federal political committee. **C** C00467431

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt: 10 / 29 / 2010
Transaction ID: SA11.13961248
Amount of Each Receipt this Period: 15000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

25000.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2540 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
FREEDOM PAC
Mailing Address PO BOX 2485
City SPRINGFIELD State VA Zip Code 22152-0485
FEC ID number of contributing federal political committee. **C** C00482703
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 16000.00
Date of Receipt 10 / 15 / 2010
Transaction ID: SA11.13932370
Amount of Each Receipt this Period 5000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GOJO PAC
Mailing Address 1330 CONNECTICUT AVENUE NW, SUITE
City WASHINGTON State DC Zip Code 20036-1704
FEC ID number of contributing federal political committee. **C** C00470286
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 16000.00
Date of Receipt 10 / 18 / 2010
Transaction ID: SA11.13942484
Amount of Each Receipt this Period 16000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GRANT THORNTON LLP PAC
Mailing Address 1250 CONNECTICUT AVE, NW SUITE 400
City WASHINGTON State DC Zip Code 20036-2660
FEC ID number of contributing federal political committee. **C** C00408260
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00
Date of Receipt 10 / 28 / 2010
Transaction ID: SA11.13961195
Amount of Each Receipt this Period 5000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 26000.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2541 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) HOGAN LOVELLS PAC		Date of Receipt
	Mailing Address 555 13TH STREET NW		<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	WASHINGTON	DC	20004-1109
	FEC ID number of contributing federal political committee. C C00261339		Transaction ID: SA11.13951155
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="2000.00"/>
		<input type="text" value="12000.00"/>	CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) ICE PAC		Date of Receipt
	Mailing Address 9158 EAST STARING LANE		<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	EDEN PRAIRIE	MN	55347-2518
	FEC ID number of contributing federal political committee. C C00075820		Transaction ID: SA11.13945230
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="10000.00"/>
		<input type="text" value="10000.00"/>	CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) INGRAM BARGE COMPANY PAC		Date of Receipt
	Mailing Address 4400 HARDING ROAD		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	NASHVILLE	TN	37205-2204
	FEC ID number of contributing federal political committee. C C00364471		Transaction ID: SA11.13959358
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="5000.00"/>
		<input type="text" value="7500.00"/>	CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="17000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2542 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) INTEGRA TELECOM HOLDINGS INC PAC	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 1201 NW LLOYD BLVD SUITE 500	Transaction ID: SA11.13948189
	City State Zip Code PORTLAND OR 97232-1259	Amount of Each Receipt this Period 7000.00
	FEC ID number of contributing federal political committee. C C00428094	CONTRIBUTION
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7000.00

B.	Full Name (Last, First, Middle Initial) INTERNATIONAL BOTTLED WATER ASSOCIATION PAC	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 1700 DIAGONAL ROAD SUITE 650	Transaction ID: SA11.13942519
	City State Zip Code ALEXANDRIA VA 22314-2864	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C C00457226	CONTRIBUTION
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00

C.	Full Name (Last, First, Middle Initial) INTERSTATE NATURAL GAS ASSOCIATION OF AMERICA PAC	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 10 G ST NE STE 700	Transaction ID: SA11.13959355
	City State Zip Code WASHINGTON DC 20002-4248	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C C00116145	CONTRIBUTION
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

SUBTOTAL of Receipts This Page (optional)	14000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2543 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
JBS USA, LLC PAC

Mailing Address 1770 PROMONTORY CIRCLE

City State Zip Code
GREELEY CO 80634-9039

FEC ID number of contributing federal political committee. **C** C00394650

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11.13965484

Amount of Each Receipt this Period
7500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
JBS USA, LLC PAC

Mailing Address 1770 PROMONTORY CIRCLE

City State Zip Code
GREELEY CO 80634-9039

FEC ID number of contributing federal political committee. **C** C00394650

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA11.13976592

Amount of Each Receipt this Period
7500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
KING PHARMACEUTICALS, INC. PAC

Mailing Address 501 5TH STREET

City State Zip Code
BRISTOL TN 37620-2304

FEC ID number of contributing federal political committee. **C** C00467829

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
MM / DD / YYYY
11 / 12 / 2010

Transaction ID: SA11.13968712

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **17000.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2544 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
LABCORP PAC

Mailing Address P.O. BOX 2230

City State Zip Code
BURLINGTON NC 27216-2230

FEC ID number of contributing federal political committee. **C** C00314997

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11.13951157

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MANATT, PHELPS AND PHILLIPS (GOLDEN STATE PAC)

Mailing Address 700 12TH STREET NW
SUITE 1100

City State Zip Code
WASHINGTON DC 20005-4075

FEC ID number of contributing federal political committee. **C** C00145342

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
11 / 22 / 2010

Transaction ID: SA11.13972717

Amount of Each Receipt this Period
7500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MCDERMOTT WILL & EMERY LLP

Mailing Address 600 13TH STREET, NW
12TH FLOOR

City State Zip Code
WASHINGTON DC 20005-3005

FEC ID number of contributing federal political committee. **C** C00299701

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
10 / 14 / 2010

Transaction ID: SA11.13932262

Amount of Each Receipt this Period
15000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

27500.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2545 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MYPAC MYLAN INC. PAC

Mailing Address 1500 CORPORATE DRIVE

City State Zip Code
CANONSBURG PA 15317-8574

FEC ID number of contributing federal political committee. **C** C00332395

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961222

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF BANKRUPTCY TRUSTEES

Mailing Address ONE WINDSOR COVE
SUITE 305

City State Zip Code
COLUMBIA SC 29223-1833

FEC ID number of contributing federal political committee. **C** C00348623

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13951158

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
NATIONAL FUNERAL DIRECTORS ASSOCIATION

Mailing Address 400 C STREET, NE

City State Zip Code
WASHINGTON DC 20002-5818

FEC ID number of contributing federal political committee. **C** C00204008

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 1 0

Transaction ID: SA11.13966043

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 5000.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2546 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
NAVISTAR GOOD GOVERNMENT FUND

Mailing Address 4201 WINFIELD ROAD
P.O. BOX 1488

City WARRENVILLE State IL Zip Code 60555-4025

FEC ID number of contributing federal political committee. **C** C00040840

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 10 / 27 / 2010
Transaction ID: SA11.13959356
 Amount of Each Receipt this Period: 5000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NEW MAJORITY FEDERAL PAC

Mailing Address 591 REDWOOD HWY.
STE. 4000

City MILL VALLEY State CA Zip Code 94941-3039

FEC ID number of contributing federal political committee. **C** C00353078

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt: 10 / 29 / 2010
Transaction ID: SA11.13961220
 Amount of Each Receipt this Period: 5000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NEWFIELD PAC

Mailing Address 363 NORTH SAM HOUSTON PARKWAY
SUITE 100

City HOUSTON State TX Zip Code 77060-2405

FEC ID number of contributing federal political committee. **C** C00443523

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA11.13945261
 Amount of Each Receipt this Period: 10000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 20000.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2547 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
NEWS CORPORATION, PAC

Mailing Address 444 NORTH CAPITOL STREET, NW

City State Zip Code
WASHINGTON DC 20001-1512

FEC ID number of contributing federal political committee. **C** C00330019

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13932371

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NORTH CAROLINA PORK COUNCIL PAC

Mailing Address 2300 REXWOODS DRIVE
SUITE 340

City State Zip Code
RALEIGH NC 27607-3361

FEC ID number of contributing federal political committee. **C** C00235184

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 4 / 2 0 1 0

Transaction ID: SA11.13966045

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NRG ENERGY INC. PAC

Mailing Address 211 CARNEGIE COURT

City State Zip Code
PRINCETON NJ 08540-6213

FEC ID number of contributing federal political committee. **C** C00366559

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13961196

Amount of Each Receipt this Period
10000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 15500.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2548 / 3187

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
OCEAN SPRAY CRANBERRIES INC. POLITICAL ACTION COMM

Mailing Address 1 OCEAN SPRAY DR

City State Zip Code
LAKEVILLE-MIDDLEBO MA 02349-1000

FEC ID number of contributing federal political committee. **C** C00114702

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13948186

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
OKLAHOMA INDEPENDENT PETROLEUM ASSOCIATION PAC (OIPA PAC)

Mailing Address 3555 NW 58TH STREET
SUITE 400

City State Zip Code
OKLAHOMA CITY OK 73112-4724

FEC ID number of contributing federal political committee. **C** C00444430

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13945262

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
ORACLE CORPORATION PAC

Mailing Address 1015 15TH STREET NW
SUITE 200

City State Zip Code
WASHINGTON DC 20005-2635

FEC ID number of contributing federal political committee. **C** C00323048

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13951156

Amount of Each Receipt this Period

6250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

13750.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2549 / 3187

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
PEPSICO CONCERNED CITIZENS FUND

Mailing Address 700 ANDERSON HILL RD.

City State Zip Code
PURCHASE NY 10577-1401

FEC ID number of contributing federal political committee. **C** C00039321

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	1	0

Transaction ID: SA11.13948185

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
PICTSWEET COMPANY PAC

Mailing Address 10 PICTSWEET DRIVE

City State Zip Code
BELLS TN 38006-4274

FEC ID number of contributing federal political committee. **C** C00479972

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	4		2	0	1	0

Transaction ID: SA11.13966037

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
PITNEY BOWES INC. PAC

Mailing Address 409 12TH STREET, NW, SUITE 701

City State Zip Code
WASHINGTON DC 20024-6100

FEC ID number of contributing federal political committee. **C** C00339499

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	1		2	0	1	0

Transaction ID: SA11.13965483

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

11000.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2550 / 3187

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
PNC FINANCIAL SERVICES PAC

Mailing Address ONE PNC PLAZA
249 FIFTH AVENUE

City State Zip Code
PITTSBURGH PA 15222-2707

FEC ID number of contributing federal political committee. **C** C00035519

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11.13932263

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
R.O.S.K.A.M. PAC

Mailing Address 610 S. BOULEVARD

City State Zip Code
TAMPA FL 33606-2693

FEC ID number of contributing federal political committee. **C** C00451294

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.13959367

Amount of Each Receipt this Period

15000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
RADIATION THERAPY SERVICES INC. PAC

Mailing Address 2234 COLONIAL BLVD

City State Zip Code
FORT MYERS FL 33907-1412

FEC ID number of contributing federal political committee. **C** C00385120

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.13961221

Amount of Each Receipt this Period

15000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

32500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2551 / 3187

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
REPUBLICAN MAIN STREET PAC

Mailing Address 1220 L STREET NW
SUITE 100-263

City State Zip Code
WASHINGTON DC 20005-4018

FEC ID number of contributing federal political committee. **C** C00165159

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11.13945260

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
RIPTIDE PAC

Mailing Address 22780 INDIAN CREEK DRIVE, SUITE 10

City State Zip Code
STERLING VA 20166-6716

FEC ID number of contributing federal political committee. **C** C00430934

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
8000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11.13951108

Amount of Each Receipt this Period

8000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
SALEM COMMUNICATIONS CORPORATION PAC

Mailing Address 4880 SANTA ROSA ROAD
SUITE 300

City State Zip Code
CAMARILLO CA 93012-0958

FEC ID number of contributing federal political committee. **C** C00321158

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13942516

Amount of Each Receipt this Period

3000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

21000.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2552 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
SEABOARD CORPORATION

Mailing Address 818 CONNECTICUT AVENUE, NW

City State Zip Code
WASHINGTON DC 20006-2701

FEC ID number of contributing federal political committee. **C** C00246736

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.13948187

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
SHERIFF PAC

Mailing Address 1115 MASSACHUSETTS AVE. NW
LOWER LEVEL

City State Zip Code
WASHINGTON DC 20005-4604

FEC ID number of contributing federal political committee. **C** C00474841

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
23000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.13932369

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
SOUTHWEST AIRLINES FREEDOM FUND, PAC

Mailing Address P O BOX 36611
HDQ 4GA

City State Zip Code
DALLAS TX 75235-1611

FEC ID number of contributing federal political committee. **C** C00341602

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7500.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13965482

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **12000.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2553 / 3187

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

SPEAK UP AMERICA PAC

Mailing Address P.O. BOX 2485

City State Zip Code
SPRINGFIELD VA 22152-0485

FEC ID number of contributing federal political committee. **C** C00376756

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13961193

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

STORM CHASERS

Mailing Address P.O. BOX 237

City State Zip Code
MONTICELLO IN 47960-0237

FEC ID number of contributing federal political committee. **C** C00380477

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
12000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11.13942518

Amount of Each Receipt this Period

12000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

TAKIN BACK AMERICA PAC

Mailing Address PO BOX 31822

City State Zip Code
SAINT LOUIS MO 63131-0822

FEC ID number of contributing federal political committee. **C** C00481242

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13961194

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

24500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2554 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
TAXICAB, LIMOUSINE, AND PARATRANSIT ASSOCIATION PAC

Mailing Address 3849 FARRAGUT AVE

City State Zip Code
KENSINGTON MD 20895-2004

FEC ID number of contributing federal political committee. **C** C00132480

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: SA11.13948188

Amount of Each Receipt this Period
15000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
TROUTMAN SANDERS LLP PAC

Mailing Address 600 PEACHTREE ST NE
STE 5200

City State Zip Code
ATLANTA GA 30308-2231

FEC ID number of contributing federal political committee. **C** C00311142

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
11 / 03 / 2010

Transaction ID: SA11.13966034

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
TRUST PAC- TEAM REPUBLICANS UTILIZING SENSIBLE TACTICS ACCT

Mailing Address 228 S WASHINGTON STREET
TRUST PAC SUITE 115

City State Zip Code
ALEXANDRIA VA 22314-5408

FEC ID number of contributing federal political committee. **C** C00330720

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
10 / 29 / 2010

Transaction ID: SA11.13961247

Amount of Each Receipt this Period
15000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

30250.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2555 / 3187
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial) VANTAGE ONCOLOGY INC PAC		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 8 / 2 0 1 0
Mailing Address 1500 ROSECRANS AVENUE SUITE 400		Transaction ID: SA11.13961169
City MANHATTAN BEACH	State CA	Amount of Each Receipt this Period 15000.00
Zip Code 90266-3754		CONTRIBUTION
FEC ID number of contributing federal political committee. C C00465583		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00	

B.

Full Name (Last, First, Middle Initial) VICTORY PAC		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 1 0
Mailing Address P.O. BOX 525		Transaction ID: SA11.13957938
City ST PETERSBURG	State FL	Amount of Each Receipt this Period 15000.00
Zip Code 33731-0525		CONTRIBUTION
FEC ID number of contributing federal political committee. C C00344374		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00	

SUBTOTAL of Receipts This Page (optional)	30000.00
TOTAL This Period (last page this line number only)	5960398.12

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2556 / 3187

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
2010 INDIANA REPUBLICAN VICTORY FUND

Mailing Address 47 SOUTH PENNSYLVANIA
SUITE300

City State Zip Code
INDIANAPOLIS IN 46204

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
46655.18

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2010

Transaction ID: SA12.IRVF01

Amount of Each Receipt this Period

28091.20

TRANSFER OF JOINT FUNDRAISING PROCEEDS

B.

Full Name (Last, First, Middle Initial)
RICK MOYER

Mailing Address 7720 NORTH COLLEGE AVENUE

City State Zip Code
INDIANAPOLIS IN 46240-2505

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS

Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2010

Transaction ID: SA12.13958124

Amount of Each Receipt this Period

5000.00

JFC ATTRIBUTION: 2010 INDIANA REPUBLICAN

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
THERESE ROONEY

Mailing Address 7720 NORTH COLLEGE AVENUE

City State Zip Code
INDIANAPOLIS IN 46240-2505

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS

Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2010

Transaction ID: SA12.13958123

Amount of Each Receipt this Period

5000.00

JFC ATTRIBUTION: 2010 INDIANA REPUBLICAN

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶

28091.20

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2557 / 3187

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
NEW SUNSHINE, LLC

Mailing Address 6270 CORPORATE DRIVE

City State Zip Code
INDIANAPOLIS IN 46278-2900

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 15 / 2010

Transaction ID: SA12.13958122

Amount of Each Receipt this Period

15000.00

JFC ATTRIBUTION: 2010 INDIANA REPUBLICAN

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
OLD NATIONAL BANK PAC

Mailing Address ONE MAIN STREET

City State Zip Code
IEVANSVILLE IN 47708-1464

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7000.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 15 / 2010

Transaction ID: SA12.13958125

Amount of Each Receipt this Period

7000.00

JFC ATTRIBUTION: 2010 INDIANA REPUBLICAN

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
2010 INDIANA REPUBLICAN VICTORY FUND

Mailing Address 47 SOUTH PENNSYLVANIA SUITE300

City State Zip Code
INDIANAPOLIS IN 46204

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
46655.18

Date of Receipt

M M / D D / Y Y Y Y
10 / 28 / 2010

Transaction ID: SA12.IRVF02

Amount of Each Receipt this Period

18563.98

TRANSFER OF JOINT FUNDRAISING PROCEEDS

SUBTOTAL of Receipts This Page (optional)

18563.98

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2558 / 3187
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. PETER F. BARANAY

Mailing Address 3580 BLACKTHORN COURT

City State Zip Code
SOUTH BEND IN 46628

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UNITED EXPORT/ABRO INDUSTRIES PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13977599

Amount of Each Receipt this Period
10000.00

JFC ATTRIBUTION: 2010 INDIANA REPUBLICAN

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
NORMAN PFAU

Mailing Address 2703 UTICA PIKE

City State Zip Code
JEFFERSONVILLE IN 47130-5251

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GEO PFAUS SONS CO INC PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13977600

Amount of Each Receipt this Period
10000.00

JFC ATTRIBUTION: 2010 INDIANA REPUBLICAN

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
AMERICAN VICTORY FUND

Mailing Address 22780 INDIAN CREEK DRIVE
STE 100

City State Zip Code
DULLES VA 20166

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 70.33

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA12.AMV01

Amount of Each Receipt this Period
70.33

TRANSFER OF JOINT FUNDRAISING PROCEEDS

SUBTOTAL of Receipts This Page (optional) ► **70.33**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2559 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
PATRICK NEAL

Mailing Address

City State Zip Code
99999

FEC ID number of contributing federal political committee. **C**

Name of Employer
NEAL COMMUNITY LAND DEVELOPMENT
Occupation
OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
150.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	3	/	2	0	1	0

Transaction ID: SA11.13977552

Amount of Each Receipt this Period
150.00

JFC ATTRIBUTION: AMERICAN VICTORY FUND

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
ARIZONA MAJORITY COMMITTEE

Mailing Address PO BOX 365

City State Zip Code
MCLEAN VA 22101

FEC ID number of contributing federal political committee. **C**

Name of Employer
Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	0	/	2	0	1	0

Transaction ID: SA12.AMC01

Amount of Each Receipt this Period
2500.00

TRANSFER OF JOINT FUNDRAISING PROCEEDS

C. Full Name (Last, First, Middle Initial)
MS. MARY LYNN LYN HAMMER

Mailing Address 5240 E. CALLE VENTURA

City State Zip Code
PHOENIX AZ 85018

FEC ID number of contributing federal political committee. **C**

Name of Employer
CHAMPION COLLEGE SERVICES
Occupation
PRESIDENT/CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	0	/	2	0	1	0

Transaction ID: SA11.13977556

Amount of Each Receipt this Period
2800.00

JFC ATTRIBUTION: ARIZONA MAJORITY COMMIT

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► **2500.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2560 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
BOEHNER FOR SPEAKER COMMITTEE

Mailing Address 631-B PENNSYLVANIA AVENUE, SE

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2614133.67

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA12.BFS001

Amount of Each Receipt this Period
530000.00

TRANSFER OF JOINT FUNDRAISING PROCEEDS

B. Full Name (Last, First, Middle Initial)
KENDALL ADAMS

Mailing Address 5601 S. 122ND E. AVENUE

City State Zip Code
TULSA OK 74146-6912

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MANHATTAN ROAD & BRIDGE PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
17600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA12.13958117

Amount of Each Receipt this Period
17600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MR. JAMES ADELSON

Mailing Address 1350 EAST 27TH PLACE

City State Zip Code
TULSA OK 74114-4110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NADEL AND GUSSMAN, LLC PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA12.13958091

Amount of Each Receipt this Period
7600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► **530000.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2561 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. ANTHONY J. ALEXANDER

Mailing Address 2936 IRONWOOD DRIVE

City State Zip Code
AKRON OH 44312-5809

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FIRSTENERGY ASSISTANT GOVERNMENTAL AFFAIRS REP.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 19450.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA12.13958048

Amount of Each Receipt this Period
1950.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
MRS. DAYNA BAIRD

Mailing Address 2735 FOLKSTONE ROAD

City State Zip Code
COLUMBUS OH 43220-4279

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GOVERNMENT EDGE CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 9600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA12.13958103

Amount of Each Receipt this Period
9600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
MR. MARTIN BARRINGTON

Mailing Address 6601 WEST BROAD STREET
ALTRIA GROUP, INC.

City State Zip Code
RICHMOND VA 23230-1723

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ALTRIA GROUP, INC. EXECUTIVE VICE PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 22600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA12.13958119

Amount of Each Receipt this Period
22600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► 0.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2562 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. RALPH BEEBE

Mailing Address 237 KINGMAN

City MASON State MI Zip Code 48854-9594

FEC ID number of contributing federal political committee. **C**

Name of Employer HIGHLAND ENGINEERING, INC. Occupation PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 12600.00

Date of Receipt: 10 / 15 / 2010

Transaction ID: SA12.13958110

Amount of Each Receipt this Period: 12600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
MR. DAVID BERAN

Mailing Address 6601 WEST BROAD STREET
ALTRIA GROUP, INC.

City RICHMOND State VA Zip Code 23230-1723

FEC ID number of contributing federal political committee. **C**

Name of Employer ALTRIA GROUP, INC. Occupation EXECUTIVE VICE PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 22600.00

Date of Receipt: 10 / 15 / 2010

Transaction ID: SA12.13958118

Amount of Each Receipt this Period: 22600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
MR. ALBERT BINGHAM

Mailing Address 706 SOUTH PARK

City HINSDALE State IL Zip Code 60521-4646

FEC ID number of contributing federal political committee. **C**

Name of Employer BULKMATIC Occupation TRUCKING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 7600.00

Date of Receipt: 10 / 15 / 2010

Transaction ID: SA12.13958089

Amount of Each Receipt this Period: 7600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► **0.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2563 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. THOMAS BOLLINGER	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 1 0
	Mailing Address 9765 ANDERSON ANTIOCH ROAD	Transaction ID: SA12.13958085
	City State Zip Code MOUNT STERLING OH 43143-9733	Amount of Each Receipt this Period 6600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 6600.00	

B.	Full Name (Last, First, Middle Initial) MR. PETER BOYLAN	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 1 0
	Mailing Address 6600 TIMBERLANE ROAD	Transaction ID: SA12.13958095
	City State Zip Code TULSA OK 74136-4521	Amount of Each Receipt this Period 7600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer SELF-EMPLOYED	Occupation SELF-EMPLOYED	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7600.00	

C.	Full Name (Last, First, Middle Initial) MR. BOB R. BROOKS, JR.	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 1 0
	Mailing Address 1107 NORTH PITT STREET UNIT 2C	Transaction ID: SA12.13958068
	City State Zip Code ALEXANDRIA VA 22314-1462	Amount of Each Receipt this Period 2600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer ALPINE GROUP	Occupation GOVERNMENT RELATIONS CONSULTANT	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4400.00	

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2564 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. SHIRLEY BURGETT	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 2922 LOST RUN ROAD	Transaction ID: SA12.13958036
	City State Zip Code FREDERICKTOWN OH 43019-9101	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer HOMEMAKER	Occupation HOMEMAKER	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

B.	Full Name (Last, First, Middle Initial) MR. WILLIAM BRIAN BURGETT	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 2922 LOST RUN ROAD	Transaction ID: SA12.13958037
	City State Zip Code FREDERICKTOWN OH 43019-9101	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer KOKOSING CONSTRUCTION, CO. INC.	Occupation CONTRACTOR	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

C.	Full Name (Last, First, Middle Initial) MR. WM BURGETT	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 8870 RIDGE ROAD P.O. BOX 225	Transaction ID: SA12.13958076
	City State Zip Code FREDERICKTOWN OH 43019-9364	Amount of Each Receipt this Period 2600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2600.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2565 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JON CALLAHN

Mailing Address 2010 W. BRADLEY PLACE

City State Zip Code
CHICAGO IL 60618-4908

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2600.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2010

Transaction ID: SA12.13958055

Amount of Each Receipt this Period
2600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
MR. JOHN A. CANNING, JR.

Mailing Address 1650 DUBLIN COURT

City State Zip Code
INVERNESS IL 60067-4726

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MADISON DEARBORN PARTNERS CHAIRMAN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 22600.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2010

Transaction ID: SA12.13958120

Amount of Each Receipt this Period
22600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MR. CHARLES CANNON

Mailing Address 1035 SENECA

City State Zip Code
WILMETTE IL 60091-1274

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JBT CORPORATION CEO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 12600.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2010

Transaction ID: SA12.13958108

Amount of Each Receipt this Period
12600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► 0.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2566 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. J. CAVE	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 3215-45TH STREET NW	Transaction ID: SA12.13958032
	City State Zip Code WASHINGTON DC 20016-2747	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer THE CYPRESS GROUP	Occupation CONSULTANT	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

B.	Full Name (Last, First, Middle Initial) MR. MICHAEL CONNOR	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 6404 HIGH DRIVE	Transaction ID: SA12.13958042
	City State Zip Code MISSION HILLS KS 66208-1934	Amount of Each Receipt this Period 900.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

C.	Full Name (Last, First, Middle Initial) MR. ROBERT CORETZ	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 2675 S. BIRMINGHAM PLACE	Transaction ID: SA12.13958090
	City State Zip Code TULSA OK 74114-4320	Amount of Each Receipt this Period 7600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation AVIATION	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7600.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2567 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. NANCY P. DORN	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 2501 49TH STREET NW	Transaction ID: SA12.13958069
	City State Zip Code WASHINGTON DC 20007-1006	Amount of Each Receipt this Period 2600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer GE	Occupation VICE PRESIDENT	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2600.00	

B.	Full Name (Last, First, Middle Initial) MR. SAM FURSETH	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 5820 OAKWOOD ROAD	Transaction ID: SA12.13958039
	City State Zip Code MISSION HILLS KS 66208-1144	Amount of Each Receipt this Period 650.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

C.	Full Name (Last, First, Middle Initial) MR. CHRISTOPHER GALVIN	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 71 S. WACKER DRIVE SUITE 3575	Transaction ID: SA12.13958101
	City State Zip Code CHICAGO IL 60606-4610	Amount of Each Receipt this Period 7600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer HARRISON STREET CAPITAL	Occupation CHAIRMAN	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7600.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2568 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. BRUCE A. GATES

Mailing Address 4135 SEMINARY ROAD

City State Zip Code
ALEXANDRIA VA 22304-1647

FEC ID number of contributing federal political committee. **C**

Name of Employer ALTRIA CLIENT SERVICE, IN-C. Occupation SENIOR VICE PRESIDENT

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 17263.64

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA12.13958112
Amount of Each Receipt this Period: 17263.64
JFC ATTRIBUTION: BOEHNER FOR SPEAKER
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
MR. KENNETH GEAR

Mailing Address 1455 PENNSYLVANIA AVENUE NW SUITE 400

City State Zip Code
WASHINGTON DC 20004-1017

FEC ID number of contributing federal political committee. **C**

Name of Employer LEADING BUILDERS OF AMERICA, INC. Occupation EXECUTIVE DIRECTOR

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 100.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA12.13958031
Amount of Each Receipt this Period: 100.00
JFC ATTRIBUTION: BOEHNER FOR SPEAKER
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MR. ROGER HAGANS, JR.

Mailing Address 2021 SOUTH LEWIS AVENUE SUITE 610

City State Zip Code
TULSA OK 74104-5712

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 12600.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA12.13958111
Amount of Each Receipt this Period: 12600.00
JFC ATTRIBUTION: BOEHNER FOR SPEAKER
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶ 0.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2569 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. JOSEPH A. HARDY, III	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 1 0
	Mailing Address ROUTE 519 P.O. BOX 584	Transaction ID: SA12.13958049
	City EIGHTY FOUR State PA Zip Code 15384	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
	Name of Employer 84 LUMBER COMPANY Occupation CHIEF EXECUTIVE OFFICER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) MR. WILLIAM H. HECHT	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 1 0
	Mailing Address 2228 ARYNESS DRIVE	Transaction ID: SA12.13958060
	City VIENNA State VA Zip Code 22181-3046	Amount of Each Receipt this Period 2600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
	Name of Employer HECHT & ASSOCIATES Occupation PRESIDENT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2600.00	[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) MR. TIMOTHY HENDRICKS	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 1 0
	Mailing Address 440 S. LASALLE STREET STE. 3909	Transaction ID: SA12.13958038
	City CHICAGO State IL Zip Code 60605-5030	Amount of Each Receipt this Period 600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00	[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 2570 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES S. HERR

Mailing Address P.O. BOX 300

City State Zip Code
NOTTINGHAM PA 19362-0300

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HERR FOODS, INC. M.F.G.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA12.13958066

Amount of Each Receipt this Period
2600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
MR. VINCENT HODES

Mailing Address 2415 W. 67TH STREET

City State Zip Code
MISSION HILLS KS 66208-2205

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA12.13958043

Amount of Each Receipt this Period
900.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MR. CLAY HUNT

Mailing Address 8235 DOUGLAS AVENUE
SUITE 1200

City State Zip Code
DALLAS TX 75225-6023

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ATROPOS EXPLORATION OIL & GAS, INVESTMENTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA12.13958064

Amount of Each Receipt this Period
2600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2571 / 3187
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RICHARD HUNT

Mailing Address 913 BERNARD STREET

City State Zip Code
ALEXANDRIA VA 22314-1209

FEC ID number of contributing federal political committee. **C**

Name of Employer CONSUMER BANK ASSOCIATION Occupation PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA12.13958033

Amount of Each Receipt this Period
100.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
MR. MARK W. ISAKOWITZ

Mailing Address 3198 POND MIST WAY

City State Zip Code
OAK HILL VA 20171-1905

FEC ID number of contributing federal political committee. **C**

Name of Employer FIERCE, ISAKOWITZ & BLALO-CK Occupation PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 7600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA12.13958087

Amount of Each Receipt this Period
7600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MR. CRAIG JOHNSON

Mailing Address 6601 WEST BROAD STREET

City State Zip Code
RICHMOND VA 23230-1723

FEC ID number of contributing federal political committee. **C**

Name of Employer ALTRIA GROUP, INC. Occupation EXECUTIVE VICE PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA12.13958059

Amount of Each Receipt this Period
2600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶ 0.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2572 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. GRANT JORDAN	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 2212W 56TH STREET	Transaction ID: SA12.13958099
	City State Zip Code MISSION HILLS KS 66208-1106	Amount of Each Receipt this Period 7600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7600.00	

B.	Full Name (Last, First, Middle Initial) MR. J. R. KEMPER	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address P.O. BOX 1012	Transaction ID: SA12.13958065
	City State Zip Code BELLEVUE WA 98009-1012	Amount of Each Receipt this Period 2600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer KEMPER DEVELOPMENT COMPANY	Occupation COMMERCIAL REAL ESTATE DEVELOPER	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2600.00	

C.	Full Name (Last, First, Middle Initial) MR. DEL KIMBAL	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 110 W. 9TH STREET STE. 100	Transaction ID: SA12.13958040
	City State Zip Code KANSAS CITY MO 64105-1791	Amount of Each Receipt this Period 650.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer EVERGREEN INTERNATIONAL	Occupation INFORMATION REQUESTED PER BEST EFFORTS	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2573 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MR. JOHN KIMBAL</p> <p>Mailing Address 13911 TIMBER RIDGE STREET</p> <p>City State Zip Code PARKVILLE MO 64152-1145</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1600.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 10 / 15 / 2010</p> <p>Transaction ID: SA12.13958047</p> <p>Amount of Each Receipt this Period 1600.00</p> <p>JFC ATTRIBUTION: BOEHNER FOR SPEAKER</p> <p>[MEMO ITEM]</p>
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<p>B. Full Name (Last, First, Middle Initial) MRS. JULIANNE LAGERSTROM</p> <p>Mailing Address 6630 RAINBOW AVENUE</p> <p>City State Zip Code MISSION HILLS KS 66208-1968</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 900.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 10 / 15 / 2010</p> <p>Transaction ID: SA12.13958041</p> <p>Amount of Each Receipt this Period 900.00</p> <p>JFC ATTRIBUTION: BOEHNER FOR SPEAKER</p> <p>[MEMO ITEM]</p>
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<p>C. Full Name (Last, First, Middle Initial) MR. HOWARD LEWIS</p> <p>Mailing Address 32830 WINTERGREEN DRIVE</p> <p>City State Zip Code SOLON OH 44139-1360</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer FAMILY HERITAGE LIFE INSURANCE Occupation CHAIRMAN, FOUNDER, & CEO</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 100.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 10 / 15 / 2010</p> <p>Transaction ID: SA12.13958207</p> <p>Amount of Each Receipt this Period 100.00</p> <p>JFC ATTRIBUTION: BOEHNER FOR SPEAKER</p> <p>[MEMO ITEM]</p>
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<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2574 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MR. ANDREW K. MALONEY</p> <p>Mailing Address 111 19TH ST, NW, SUITE 1100</p> <p>City State Zip Code WASHINGTON DC 20036</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation OGILVY GOVERNMENT RELATIONS GOVERNMENT RELATIONS</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 10000.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 15 / 2010</p> <p>Transaction ID: SA12.13958104</p> <p>Amount of Each Receipt this Period 10000.00</p> <p>JFC ATTRIBUTION: BOEHNER FOR SPEAKER</p> <p>[MEMO ITEM]</p>
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<p>B. Full Name (Last, First, Middle Initial) MR. JOSEPH MATSON</p> <p>Mailing Address 1462 SW TROON CIRCLE</p> <p>City State Zip Code PALM CITY FL 34990-4447</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 12600.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 15 / 2010</p> <p>Transaction ID: SA12.13958109</p> <p>Amount of Each Receipt this Period 12600.00</p> <p>JFC ATTRIBUTION: BOEHNER FOR SPEAKER</p> <p>[MEMO ITEM]</p>
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<p>C. Full Name (Last, First, Middle Initial) HON. JAMES MCCREY</p> <p>Mailing Address 1011 GELSTON CIRCLE</p> <p>City State Zip Code MCLEAN VA 22102-2107</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation CAPITOL COUNSEL LLC PARTNER</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 100.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 15 / 2010</p> <p>Transaction ID: SA12.13958030</p> <p>Amount of Each Receipt this Period 100.00</p> <p>JFC ATTRIBUTION: BOEHNER FOR SPEAKER</p> <p>[MEMO ITEM]</p>
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SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2575 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DENNIS MILKS

Mailing Address 976 ELLIS

City LIBERTY State MO Zip Code 64068-3351

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5600.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA12.13958084
 Amount of Each Receipt this Period: 5600.00
 JFC ATTRIBUTION: BOEHNER FOR SPEAKER
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
MR. STEPHEN MILLER

Mailing Address 29 ATHERTON AVENUE

City ATHERTON State CA Zip Code 94027-4047

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA12.13958034
 Amount of Each Receipt this Period: 100.00
 JFC ATTRIBUTION: BOEHNER FOR SPEAKER
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MRS. TERRY MILLER

Mailing Address 29 ATHERTON AVENUE

City ATHERTON State CA Zip Code 94027-4047

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA12.13958035
 Amount of Each Receipt this Period: 100.00
 JFC ATTRIBUTION: BOEHNER FOR SPEAKER
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► 0.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2576 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. A. MAL MAL MIXON		Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 3105 TOPPING LANE		Transaction ID: SA12.13958050
	City CHAGRIN FALLS	State OH	Zip Code 44022-6649
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2400.00
	Name of Employer INVACARE CORPORATION	Occupation CHAIRMAN	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) DONNA MOORE		Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 8976 CROOKED STICK COURT		Transaction ID: SA12.13958096
	City NAPLES	State FL	Zip Code 34113-1678
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 7600.00
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 7600.00	[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) MR. KEVIN P. MOORE		Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 8976 CROOKED STICK CT.		Transaction ID: SA12.13958093
	City NAPLES	State FL	Zip Code 34113-1678
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 7600.00
	Name of Employer ROONEY HOLDINGS, INC.	Occupation CFO	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 7600.00	[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2577 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. FRANK MURPHY	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 2440 E. 29TH STREET	Transaction ID: SA12.13958098
	City State Zip Code TULSA OK 74114-5619	Amount of Each Receipt this Period 7600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
	Name of Employer Occupation FW MURPHY PRESIDENT/CEO	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7600.00	

B.	Full Name (Last, First, Middle Initial) MR. DON MUSICK	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 254 HANLEY IND. CT.	Transaction ID: SA12.13958102
	City State Zip Code ST. LOUIS MO 63144-1508	Amount of Each Receipt this Period 7600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
	Name of Employer Occupation MUSICK CONSTRUCTION CO. GENERAL CONTRACTOR	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7600.00	

C.	Full Name (Last, First, Middle Initial) MR. CHRISTOPHER NASSETTA	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 2904 NORTH DINWIDDIE STREET	Transaction ID: SA12.13958106
	City State Zip Code ARLINGTON VA 22207-2751	Amount of Each Receipt this Period 12600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
	Name of Employer Occupation HILTON WORLDWIDE INFORMATION REQUESTED PER BEST EFFORTS	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 12600.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2578 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ARACADIO NEIRA

Mailing Address 613 STURTZ CIRCLE

City State Zip Code
NORMAN OK 73072-3720

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MANHATTAN CONTRUSCTION CO. EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 7600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA12.13958094

Amount of Each Receipt this Period
7600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
MR. THOMAS O'DONNELL

Mailing Address 434 W. 57TH TER.

City State Zip Code
KANSAS CITY MO 64113-1272

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA12.13958073

Amount of Each Receipt this Period
2600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM P. O'HARA

Mailing Address P.O. BOX 342708

City State Zip Code
AUSTIN TX 78734-0046

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA12.13958067

Amount of Each Receipt this Period
2600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2579 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. THOMAS PATRICK

Mailing Address 199 EAST LAKE SHORE DRIVE
APT. 7E

City State Zip Code
CHICAGO IL 60611-1340

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NEW VERNON CAPITAL INVESTMENTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA12.13958080

Amount of Each Receipt this Period
5000.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
MS. ANN PATRON

Mailing Address 160 EAST 48TH STREET

City State Zip Code
NEW YORK NY 10017-1225

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WREN PRESS SELF-EMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA12.13958206

Amount of Each Receipt this Period
100.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
JOHN PAYNE

Mailing Address 2336 CHIILDERS RD

City State Zip Code
MORION IL 62959-9674

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HEARTLAND PUMP RENTAL AND SALES EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA12.13958045

Amount of Each Receipt this Period
1100.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► 0.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2580 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. PAUL PURCELL	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 825 S. WASHINGTON STREET	Transaction ID: SA12.13958121
	City State Zip Code HINSDALE IL 60521-4530	Amount of Each Receipt this Period 22600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
	Name of Employer Occupation ROBERT W. BAIRD & CO. INVESTMENT BANKER	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 22600.00	

B.	Full Name (Last, First, Middle Initial) MRS. LEIGH PUSEY	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 1119 ALEXANDRIA AVENUE	Transaction ID: SA12.13958057
	City State Zip Code ALEXANDRIA VA 22308-1015	Amount of Each Receipt this Period 2600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
	Name of Employer Occupation AMERICAN INSURANCE ASSOCIATION PRESIDENT & CEO	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2600.00	

C.	Full Name (Last, First, Middle Initial) MR. DAVID REYES	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 6250 N. RIVER ROAD SUITE 9000	Transaction ID: SA12.13958083
	City State Zip Code ROSEMONT IL 60018-4241	Amount of Each Receipt this Period 5300.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
	Name of Employer Occupation REYES HOLDINGS INFORMATION REQUESTED PER BEST EFFORTS	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5300.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2581 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES REYES

Mailing Address 4655 HAWTHORNE LANE NW

City State Zip Code
WASHINGTON DC 20016-3437

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PREMIUM DISTRIBUTORS PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5300.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2010

Transaction ID: SA12.13958082

Amount of Each Receipt this Period
5300.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
MR. PETER D. RICH

Mailing Address P.O. BOX 1610

City State Zip Code
MIDDLEBURG VA 20118-1610

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RICH FEVER GROUP CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2600.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2010

Transaction ID: SA12.13958061

Amount of Each Receipt this Period
2600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MR. JACK ROBERT

Mailing Address 11411 E. 133RD STREET SO.

City State Zip Code
BROKEN ARROW OK 74011-5235

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MANHATTAM CONSTRUCTION CO. CONSTRUCTION MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 7600.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2010

Transaction ID: SA12.13958097

Amount of Each Receipt this Period
7600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2582 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. KATHLEEN ROONEY
Mailing Address 800 ADMIRALTY
City State Zip Code
NAPLES FL 34102
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
HOMEMAKER HOMEMAKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2600.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0
Transaction ID: SA12.13958071
Amount of Each Receipt this Period 2600.00
JFC ATTRIBUTION: BOEHNER FOR SPEAKER
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
MR. TIMOTHY ROONEY
Mailing Address 6300 N. CENTRAL EXPRESSWAY
City State Zip Code
DALLAS TX 75206-4102
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
MANHATTAN HOLDINGS EXECUTIVE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2600.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0
Transaction ID: SA12.13958058
Amount of Each Receipt this Period 2600.00
JFC ATTRIBUTION: BOEHNER FOR SPEAKER
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MR. PAUL ROWSEY
Mailing Address 3401 ARMSTRONG AVENUE
City State Zip Code
DALLAS TX 75205-3949
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
R2M PARTNERS, LLC INVESTMENTS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2600.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0
Transaction ID: SA12.13958070
Amount of Each Receipt this Period 2600.00
JFC ATTRIBUTION: BOEHNER FOR SPEAKER
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► 0.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2583 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DAVID SANCHEZ
Mailing Address 817 NE DARTMORE CT.
City State Zip Code
LEE'S SUMMIT MO 64064
FEC ID number of contributing federal political committee. **C**
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4600.00
Date of Receipt 10 / 15 / 2010
Transaction ID: SA12.13958078
Amount of Each Receipt this Period 4600.00
JFC ATTRIBUTION: BOEHNER FOR SPEAKER
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
MR. FRED SAUER
Mailing Address 454 HAMMERSMITH ROAD
City State Zip Code
SAINT LOUIS MO 63141-8628
FEC ID number of contributing federal political committee. **C**
Name of Employer ORION INVESTMENT COMPANY
Occupation EXECUTIVE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 7600.00
Date of Receipt 10 / 15 / 2010
Transaction ID: SA12.13958088
Amount of Each Receipt this Period 7600.00
JFC ATTRIBUTION: BOEHNER FOR SPEAKER
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MR. GARY K. SCHELL
Mailing Address 415 TURNBERRY DRIVE
City State Zip Code
JEFFERSON CITY MO 65109-4526
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED
Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 17600.00
Date of Receipt 10 / 15 / 2010
Transaction ID: SA12.13958114
Amount of Each Receipt this Period 17600.00
JFC ATTRIBUTION: BOEHNER FOR SPEAKER
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶ 0.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2584 / 3187
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JOHN SCHIFF

Mailing Address 6200 S. GILMORE ROAD

City State Zip Code
FAIRFIELD OH 45014-5141

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CINCINNATI FINANCIAL CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA12.13958052

Amount of Each Receipt this Period
2400.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
MR. THOMAS SCHNEIDER

Mailing Address 12 CONTENTMENT ISLAND ROAD

City State Zip Code
DARIEN CT 06820-6204

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 12600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA12.13958107

Amount of Each Receipt this Period
12600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MRS. MARY SEIDEL

Mailing Address 1445 NEW YORK AVENUE, NW
7TH FLOOR

City State Zip Code
WASHINGTON DC 20005-2134

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REINSURANCE ASSOCIATION OF AMERICA VICE PRESIDENT & DIRECTOR OF FEDERAL A

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 17600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA12.13958113

Amount of Each Receipt this Period
17600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► 0.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2585 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. NATHAN SHAPIRO	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 1661 RYDERS LANE	Transaction ID: SA12.13958072
	City State Zip Code HIGHLAND PARK IL 60035-2141	Amount of Each Receipt this Period 2600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer SF INVESTMENTS	Occupation INVESTMENTS	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2600.00	

B.	Full Name (Last, First, Middle Initial) MR. STEPHEN SHUTTE	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 763 MOHAWK DRIVE	Transaction ID: SA12.13958086
	City State Zip Code SPRINGFIELD OH 45502-8704	Amount of Each Receipt this Period 6600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 6600.00	

C.	Full Name (Last, First, Middle Initial) MR. JOHN SNYDER	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 1505 EAST 19TH STREET	Transaction ID: SA12.13958100
	City State Zip Code TULSA OK 74120-7612	Amount of Each Receipt this Period 7600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer MANHATTAN CONSTRUCTION CO.	Occupation OK DIVISION PRESIDENT	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7600.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2586 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. THOMAS SNYDER

Mailing Address 5715 E. 118TH STREET

City State Zip Code
TULSA OK 74137-8512

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ANCHOR STONE COMPANY PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 7600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA12.13958092

Amount of Each Receipt this Period
7600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
MR. MIKE L. SWINFORD

Mailing Address 111 E. CHESTNUT #51K

City State Zip Code
CHICAGO IL 60611-6029

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
N/A N/A

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA12.13958051

Amount of Each Receipt this Period
2400.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MR. PETER TAMBORSKI

Mailing Address 5953 CREEKVIEW DRIVE

City State Zip Code
MILFORD OH 45150-5534

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA12.13958077

Amount of Each Receipt this Period
4600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► **0.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2587 / 3187

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. C. PHILIP THOLEN

Mailing Address 7626 SOUTH MARION

City State Zip Code
TULSA OK 74136-8005

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SAMSON INVESTMENT COMPANY EXECUTIVE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 17600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA12.13958115

Amount of Each Receipt this Period

17600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
MRS. NANCY THOLEN

Mailing Address 7626 SOUTH MARION

City State Zip Code
TULSA OK 74136-8005

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 17600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA12.13958116

Amount of Each Receipt this Period

17600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
MR. STEVE VANAMBURGH

Mailing Address 3945 MARQUETTE

City State Zip Code
DALLAS TX 75225-5432

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
KDC CEO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA12.13958063

Amount of Each Receipt this Period

2600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2588 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. BILL WARE
Mailing Address P.O. BOX 1
City State Zip Code
AMARILLO TX 79105-0001
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
AMARILLO NATIONAL BANK BANKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2600.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0
Transaction ID: SA12.13958075
Amount of Each Receipt this Period 2600.00
JFC ATTRIBUTION: BOEHNER FOR SPEAKER
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
MR. RICHARD WARE, II
Mailing Address P.O. BOX 1
City State Zip Code
AMARILLO TX 79105-0001
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
AMARILLO NATIONAL BANK BANKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2600.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0
Transaction ID: SA12.13958074
Amount of Each Receipt this Period 2600.00
JFC ATTRIBUTION: BOEHNER FOR SPEAKER
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM WARNOCK
Mailing Address 6708 E. 109TH STREET
City State Zip Code
TULSA OK 74133-7160
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
SOHO PROPERTIES, LLC PETROLEUM ENGINEER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2600.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0
Transaction ID: SA12.13958056
Amount of Each Receipt this Period 2600.00
JFC ATTRIBUTION: BOEHNER FOR SPEAKER
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► 0.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2589 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RONALD S. WILHEIM

Mailing Address 7500 WILLOWBROOK LANE

City State Zip Code
CINCINNATI OH 45237-2228

FEC ID number of contributing federal political committee. **C**

Name of Employer COMMUNICARE Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 3800.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA12.13958046
Amount of Each Receipt this Period: 1200.00
JFC ATTRIBUTION: BOEHNER FOR SPEAKER
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
MR. RAYMOND YORK

Mailing Address 3441 E. HARBOUR DRIVE

City State Zip Code
PHOENIX AZ 85034-7229

FEC ID number of contributing federal political committee. **C**

Name of Employer EWING IRRIGATION Occupation MANAGER

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2600.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA12.13958062
Amount of Each Receipt this Period: 2600.00
JFC ATTRIBUTION: BOEHNER FOR SPEAKER
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
AK STEEL CORP. PAC

Mailing Address 9227 CENTRE POINTE DRIVE

City State Zip Code
WEST CHESTER OH 45069-4822

FEC ID number of contributing federal political committee. **C** C00290973

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA12.13958054
Amount of Each Receipt this Period: 2500.00
JFC ATTRIBUTION: BOEHNER FOR SPEAKER
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► 0.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2590 / 3187

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ASSOCIATION OF PROGRESSIVE RENTAL ORGANIZATIONS PAC (APRO PAC)

Mailing Address 1504 ROBIN HOOD TRAIL

City State Zip Code
AUSTIN TX 78703-2624

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA12.13958081

Amount of Each Receipt this Period
5000.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
CITIZENS FOR TURNER

Mailing Address 120 W. SECOND STREET
STE. 1510

City State Zip Code
DAYTON OH 45402-1603

FEC ID number of contributing federal political committee. **C** C00373001

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA12.13958044

Amount of Each Receipt this Period
1000.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
HCR MANOR CARE PAC

Mailing Address 333 N. SUMMIT STREET
P.O. BOX 10086

City State Zip Code
TOLEDO OH 43604-1531

FEC ID number of contributing federal political committee. **C** C00260141

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA12.13958053

Amount of Each Receipt this Period
2500.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2591 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
UNITED HEALTH SERVICES PAC

Mailing Address 211 EAST DOYLE STREET

City TOCCOA State GA Zip Code 30577-2960

FEC ID number of contributing federal political committee. **C** C00400135

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA12.13958079
 Amount of Each Receipt this Period: 5000.00
 JFC ATTRIBUTION: BOEHNER FOR SPEAKER
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
WINSTON & STRAWN, LLP PAC

Mailing Address 1700 K STREET, NW

City WASHINGTON State DC Zip Code 20006-3817

FEC ID number of contributing federal political committee. **C** C00282921

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: SA12.13958105
 Amount of Each Receipt this Period: 10000.00
 JFC ATTRIBUTION: BOEHNER FOR SPEAKER
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
BOEHNER FOR SPEAKER COMMITTEE

Mailing Address 631-B PENNSYLVANIA AVENUE, SE

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2614133.67

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA12.BFS002
 Amount of Each Receipt this Period: 320000.00
 TRANSFER OF JOINT FUNDRAISING PROCEEDS

SUBTOTAL of Receipts This Page (optional) ► 320000.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2592 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. VIRGINIA BUSCH	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address P.O. BOX 935	Transaction ID: SA12.13958133
	City State Zip Code SAINT PETERS MO 63376-0016	Amount of Each Receipt this Period 30400.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		[MEMO ITEM]
Occupation INFORMATION REQUESTED PER BEST EFFORTS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]
Aggregate Year-to-Date ▼ 30400.00		

B.	Full Name (Last, First, Middle Initial) TERRY DUFFY	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 25-115TH STREET	Transaction ID: SA12.13958132
	City State Zip Code LEMONT IL 60439-8754	Amount of Each Receipt this Period 30313.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer CME		[MEMO ITEM]
Occupation CHAIRMAN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]
Aggregate Year-to-Date ▼ 30313.00		

C.	Full Name (Last, First, Middle Initial) MRS. JOYCE GATES	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 4135 SEMINARY ROAD	Transaction ID: SA12.13958135
	City State Zip Code ALEXANDRIA VA 22304-1647	Amount of Each Receipt this Period 30400.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		[MEMO ITEM]
Occupation INFORMATION REQUESTED PER BEST EFFORTS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]
Aggregate Year-to-Date ▼ 30400.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2593 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JERRY HODGE

Mailing Address 36 OLDHAM CIRCLE

City State Zip Code
AMARILLO TX 79109-3550

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MAXOR NATIONAL PHARMACY EXECUTIVE/OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 22600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA12.13958128

Amount of Each Receipt this Period
22600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
MR. JOHN JORDAN

Mailing Address 767 5TH AVE., 48TH FL.

City State Zip Code
NEW YORK NY 10153-0023

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
THE JORDAN COMPANIES CHAIRMAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA12.13958137

Amount of Each Receipt this Period
30400.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
KRISTIN PATRICK

Mailing Address 185 HILDRETH LANE
P.O. BOX 1560

City State Zip Code
BRIDGEHAMPTON NY 11932-1560

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NA NA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 28000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA12.13958130

Amount of Each Receipt this Period
28000.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2594 / 3187
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. MARILYN PATRICK

Mailing Address 199 EAST LAKE SHORE

City State Zip Code
CHICAGO IL 60611-1340

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation NA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA12.13958138

Amount of Each Receipt this Period
30400.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
MR. THOMAS PATRICK, JR.

Mailing Address 185 HILDRETH LANE

City State Zip Code
BRIDGEHAMPTON NY 11932

FEC ID number of contributing federal political committee. **C**

Name of Employer MERRILL LYNCH Occupation INVESTMENTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 28000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA12.13958131

Amount of Each Receipt this Period
28000.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MRS. ANNE PURCELL

Mailing Address 27W332 CHURCHILL ROAD

City State Zip Code
WINFIELD IL 60190-1816

FEC ID number of contributing federal political committee. **C**

Name of Employer HOUSEWIFE Occupation HOUSEWIFE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 22600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA12.13958129

Amount of Each Receipt this Period
22600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► 0.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2595 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL SZYMANCZYK

Mailing Address 215 DRYDEN LANE

City State Zip Code
RICHMOND VA 23229-8204

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ALTRIA GROUP, INC. CHAIRMAN AND CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA12.13958136

Amount of Each Receipt this Period
30400.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
MR. JOEL TUCKER

Mailing Address 6299 NALL AVENUE SUITE 100

City State Zip Code
MISSION KS 66202-3547

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA12.13958139

Amount of Each Receipt this Period
30400.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MR. GARY WALSH

Mailing Address 10 HILLOCKS LANE

City State Zip Code
SHERIDAN WY 82801-9054

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA12.13958134

Amount of Each Receipt this Period
30400.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2596 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
BOEHNER FOR SPEAKER COMMITTEE

Mailing Address 631-B PENNSYLVANIA AVENUE, SE

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2614133.67

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA12.BFS003

Amount of Each Receipt this Period
131000.00

TRANSFER OF JOINT FUNDRAISING PROCEEDS

B. Full Name (Last, First, Middle Initial)
MR. JAMAL DANIEL

Mailing Address 600 TRAVIS
6800 JP MORGAN CHASE TOWER

City State Zip Code
HOUSTON TX 77002-3010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CREST INVESTMENT COMPANY INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 13000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA12.13958174

Amount of Each Receipt this Period
13000.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MR. E. ECCLESTONE

Mailing Address P.O. BOX 3267

City State Zip Code
WEST PALM BEACH FL 33402-3267

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PGA NATIONAL RESORT PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA12.13958176

Amount of Each Receipt this Period
30400.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► 131000.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2597 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MR. CHRISTOPHER ELSTON</p> <p>Mailing Address 9216 CHEROKEE LANE</p> <p>City State Zip Code LEAWOOD KS 66206-1702</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 5600.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 8 / 2 0 1 0</p> <p>Transaction ID: SA12.13958169</p> <p>Amount of Each Receipt this Period 5600.00</p> <p>JFC ATTRIBUTION: BOEHNER FOR SPEAKER</p> <p>[MEMO ITEM]</p>
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<p>B. Full Name (Last, First, Middle Initial) SECRETARY DONALD L. EVANS</p> <p>Mailing Address P.O. BOX 50990</p> <p>City State Zip Code MIDLAND TX 79710-0990</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 100.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 8 / 2 0 1 0</p> <p>Transaction ID: SA12.13958165</p> <p>Amount of Each Receipt this Period 100.00</p> <p>JFC ATTRIBUTION: BOEHNER FOR SPEAKER</p> <p>[MEMO ITEM]</p>
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<p>C. Full Name (Last, First, Middle Initial) MR. PHILIP FRIEDMAN</p> <p>Mailing Address 43503 BUTLER PLACE</p> <p>City State Zip Code LEESBURG VA 20176-7428</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer P. FRIEDMAN & ASSOC. INC. Occupation PRESIDENT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 2600.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 8 / 2 0 1 0</p> <p>Transaction ID: SA12.13958167</p> <p>Amount of Each Receipt this Period 2600.00</p> <p>JFC ATTRIBUTION: BOEHNER FOR SPEAKER</p> <p>[MEMO ITEM]</p>
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SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2598 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. ALEXANDER KARP	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 8 / 2 0 1 0
	Mailing Address 927 ROMANA AVE.	Transaction ID: SA12.13958177
	City PALO ALTO State CA Zip Code 94301	Amount of Each Receipt this Period 2600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
	Name of Employer PALANTIR TECHNOLOGIES Occupation CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2600.00	[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) MR. SAM H. MILLER	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 8 / 2 0 1 0
	Mailing Address 50 PUBLIC SQUARE 1100 TERMINAL TOWER	Transaction ID: SA12.13958173
	City CLEVELAND State OH Zip Code 44113-2202	Amount of Each Receipt this Period 10000.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
	Name of Employer FOREST CITY ENTERPRISES Occupation CHAIRMAN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 20000.00	[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) MR. RICHARD MILLS	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 8 / 2 0 1 0
	Mailing Address 602 CRESCENT PLACE STE. 100	Transaction ID: SA12.13958170
	City RIDGELAND State MS Zip Code 39157-8676	Amount of Each Receipt this Period 7600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 7600.00	[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2599 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. TIM MUIR	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 5600 W. 97TH STREET	Transaction ID: SA12.13958168
	City State Zip Code OVERLAND PARK KS 66207-2925	Amount of Each Receipt this Period 5100.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		[MEMO ITEM]
Occupation INFORMATION REQUESTED PER BEST EFFORTS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 5100.00		

B.	Full Name (Last, First, Middle Initial) MR. WILLIAM RUMPKE	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 6045 DRY RIDGE ROAD	Transaction ID: SA12.13958166
	City State Zip Code CINCINNATI OH 45252-1739	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		[MEMO ITEM]
Occupation INFORMATION REQUESTED PER BEST EFFORTS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 100.00		

C.	Full Name (Last, First, Middle Initial) MR. JOE FRANK F. SANDERSON, JR.	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address P.O. BOX 988	Transaction ID: SA12.13958178
	City State Zip Code LAUREL MS 39441-0988	Amount of Each Receipt this Period 7600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer SANDERSON FARMS INC.		[MEMO ITEM]
Occupation CHAIRMAN & CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 7600.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2600 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MS. VIRGINIA SNOWDON	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address INFO REQUESTED	Transaction ID: SA12.13958171
	City State Zip Code INFO REQUESTED XX 99999	Amount of Each Receipt this Period 7600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7600.00	

B.	Full Name (Last, First, Middle Initial) MR. ROBERT THEISEN	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 3521 LEGACY HILLS CT.	Transaction ID: SA12.13958179
	City State Zip Code LONGWOOD FL 32779-3198	Amount of Each Receipt this Period 7600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7600.00	

C.	Full Name (Last, First, Middle Initial) HUNTINGTON BANCSHARES INC. PAC	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 41 SOUTH HIGH STREET HUNTINGTON CENTER	Transaction ID: SA12.13958172
	City State Zip Code COLUMBUS OH 43215	Amount of Each Receipt this Period 10000.00
	FEC ID number of contributing federal political committee. C C00165589	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer	Occupation	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2601 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
PICKERING FOR CONGRESS
Mailing Address P.O. BOX 4297

City State Zip Code
BRANDON MS 39047-4297

FEC ID number of contributing federal political committee. **C** C00308577

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 23000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA12.13958175

Amount of Each Receipt this Period
23000.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
BOEHNER FOR SPEAKER COMMITTEE
Mailing Address 631-B PENNSYLVANIA AVENUE, SE

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2614133.67

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA12.BFS004

Amount of Each Receipt this Period
194000.00

TRANSFER OF JOINT FUNDRAISING PROCEEDS

C. Full Name (Last, First, Middle Initial)
REBECCA ANDERSON
Mailing Address 3525 S 17TH STREET

City State Zip Code
ARLINGTON VA 22204-5003

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WILLIAMS & JENSEN, PLLC GOVERNMENT RELATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA12.13958149

Amount of Each Receipt this Period
2600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► 194000.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2602 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RICHARD ANDERSON

Mailing Address 345 BRENTWOOD TERRACE

City ATLANTA State GA Zip Code 30305-3206

FEC ID number of contributing federal political committee. **C**

Name of Employer DELTA AIRLINES, INC. Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2600.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA12.13958150
Amount of Each Receipt this Period: 2600.00
JFC ATTRIBUTION: BOEHNER FOR SPEAKER
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
MR. BOB R. BROOKS, JR.

Mailing Address 1107 NORTH PITT STREET
UNIT 2C

City ALEXANDRIA State VA Zip Code 22314-1462

FEC ID number of contributing federal political committee. **C**

Name of Employer ALPINE GROUP Occupation GOVERNMENT RELATIONS CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4400.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA12.13958155
Amount of Each Receipt this Period: 1800.00
JFC ATTRIBUTION: BOEHNER FOR SPEAKER
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MR. BERNARD BUTLER

Mailing Address 1700 SUNNY SLOPE LANE

City MANHATTAN State KS Zip Code 66502-4633

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PIZZA HUT FRANCHISE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA12.13958156
Amount of Each Receipt this Period: 600.00
JFC ATTRIBUTION: BOEHNER FOR SPEAKER
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶ 0.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2603 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES HIGGINS

Mailing Address 18 POWDERHORN ROAD

City State Zip Code
HOHOKUS NJ 07423-1709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA12.13958151

Amount of Each Receipt this Period
2600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
MR. JOHN KEELEY

Mailing Address 401 S. LASALLE STREET

City State Zip Code
CHICAGO IL 60605-1014

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
KEELEY ASSET MAN. INVESTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 17600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA12.13958145

Amount of Each Receipt this Period
17600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MRS. BRIDGET KOCH

Mailing Address 974 S. OCEAN BLVD.

City State Zip Code
PALM BEACH FL 33480-4909

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA12.13958142

Amount of Each Receipt this Period
30400.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► 0.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2604 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial) MR. WILLIAM KOCH		Date of Receipt MM / DD / YYYY 10 / 22 / 2010
Mailing Address 1601 FORUM PLACE SUITE 307		Transaction ID: SA12.13958141
City WEST PALM BEACH	State FL	Amount of Each Receipt this Period 30400.00
Zip Code 33401-8103	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 30400.00	

B.

Full Name (Last, First, Middle Initial) MR. SAM H. MILLER		Date of Receipt MM / DD / YYYY 10 / 22 / 2010
Mailing Address 50 PUBLIC SQUARE 1100 TERMINAL TOWER		Transaction ID: SA12.13958154
City CLEVELAND	State OH	Amount of Each Receipt this Period 2400.00
Zip Code 44113-2202	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer FOREST CITY ENTERPRISES	Occupation CHAIRMAN	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20000.00	

C.

Full Name (Last, First, Middle Initial) MR. JOSEPH PRUS		Date of Receipt MM / DD / YYYY 10 / 22 / 2010
Mailing Address 5325 WOOSTER PIKE		Transaction ID: SA12.13958157
City CINCINNATI	State OH	Amount of Each Receipt this Period 250.00
Zip Code 45226-2224	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer PRUS CONSTRUCTION CO.	Occupation MANAGEMENT/OWNER	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2605 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. SUSAN RAMTHUN

Mailing Address 307 SOUTHWEST DRIVE

City State Zip Code
SILVER SPRING MD 20901-1241

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA12.13958153

Amount of Each Receipt this Period
2600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
EVELYN VOLPE

Mailing Address 34 DENYELLE DRIVE

City State Zip Code
ROCKY HILL CT 06067-1874

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA12.13958152

Amount of Each Receipt this Period
2600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL WARD

Mailing Address 1908 RIVER ROAD

City State Zip Code
JACKSONVILLE FL 32207-3904

FEC ID number of contributing federal political committee. **C**

Name of Employer CSX CORPORATION
Occupation RAILROAD WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
30400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA12.13958140

Amount of Each Receipt this Period
30400.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► **0.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2606 / 3187
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GARY C. WENDT

Mailing Address 3055 HARBOR DRIVE

City State Zip Code
FORT LAUDERDALE FL 33316-2460

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GE CAPITAL SERVICES FORMER PRESIDENT, CHAIRMAN, CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 28000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA12.13958143

Amount of Each Receipt this Period
28000.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
MR. JOHN YOUNG

Mailing Address 1601 BRYAN STREET

City State Zip Code
DALLAS TX 75201-3430

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ENERGY FUTURE HOLDINGS (E-FH) PRESIDENT AND CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA12.13958158

Amount of Each Receipt this Period
100.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
CEMEX INC. PAC

Mailing Address 840 GESSNER DRIVE, SUITE 1400

City State Zip Code
HOUSTON TX 77024-4152

FEC ID number of contributing federal political committee. **C** C00111880

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA12.13958147

Amount of Each Receipt this Period
10000.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2607 / 3187

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
HEALTH MANAGEMENT ASSOC. PAC

Mailing Address 5811 PELICAN BAY BLVD.
SUITE 500

City State Zip Code
NAPLES FL 34108-2711

FEC ID number of contributing federal political committee. **C** C00442418

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA12.13958148

Amount of Each Receipt this Period

5000.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
REYNOLDS FOR CONGRESS

Mailing Address CORPORATE CROSSINGS
171 SULLY'S TRAIL STE. 201

City State Zip Code
PITTSFORD NY 14534-4557

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
23000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA12.13958144

Amount of Each Receipt this Period

23000.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
TOMPAC FEDERAL

Mailing Address P.O. BOX 16488

City State Zip Code
ARLINGTON VA 22215-1488

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA12.13958146

Amount of Each Receipt this Period

10000.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2608 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) BOEHNER FOR SPEAKER COMMITTEE		Date of Receipt
	Mailing Address 631-B PENNSYLVANIA AVENUE, SE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 03 / 2010
	City	State	Zip Code
	WASHINGTON	DC	20003
	FEC ID number of contributing federal political committee. C		Transaction ID: SA12.BFS005
Name of Employer		Occupation	Amount of Each Receipt this Period
			<input type="text"/> 253000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	TRANSFER OF JOINT FUNDRAISING PROCEEDS
		<input type="text"/> 2614133.67	

B.	Full Name (Last, First, Middle Initial) MR. LEE AINSLIE		Date of Receipt
	Mailing Address 767 5TH AVENUE 11TH FLOOR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 03 / 2010
	City	State	Zip Code
	NEW YORK	NY	10153
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13977625
Name of Employer MAVERICK CAPITAL		Occupation MANAGING PARTNER	Amount of Each Receipt this Period
			<input type="text"/> 6600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
		<input type="text"/> 6600.00	[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) MR. GARY ANDRES		Date of Receipt
	Mailing Address 6919 N. 30TH STREET		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 03 / 2010
	City	State	Zip Code
	ARLINGTON	VA	22213
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13977655
Name of Employer DUTKO WORLDWIDE		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
			<input type="text"/> 2600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
		<input type="text"/> 2600.00	[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 253000.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2609 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. SUSAN ANDRES		Date of Receipt
	Mailing Address 600 13TH STREET NW STE. 340 WEST		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 0 3 / 2 0 1 0
	City	State	Zip Code
	WASHINGTON	DC	20005
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13977654
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2600.00	2600.00
			JFC ATTRIBUTION: BOEHNER FOR SPEAKER [MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) MR. DANIEL L. BAKER		Date of Receipt
	Mailing Address 5855 OAKRIDGE DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 0 3 / 2 0 1 0
	City	State	Zip Code
	HAMILTON	OH	45011
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13977632
Name of Employer BAKER CONCRETE CONSTRUCTION		Occupation CEO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 12600.00	12600.00
			JFC ATTRIBUTION: BOEHNER FOR SPEAKER [MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) MR. MARK BAKER		Date of Receipt
	Mailing Address 5697 ORCHARD AVENUE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 0 3 / 2 0 1 0
	City	State	Zip Code
	WHITE BEAR LAKE	MN	55110
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.13977644
Name of Employer SCOTTS COMPANY		Occupation PRESIDENT & COO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1300.00	1300.00
			JFC ATTRIBUTION: BOEHNER FOR SPEAKER [MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2610 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. BERNARD BUTLER	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 1700 SUNNY SLOPE LANE	Transaction ID: SA11.13977648
	City State Zip Code MANHATTAN KS 66502-4633	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer SELF-EMPLOYED	Occupation PIZZA HUT FRANCHISE	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

B.	Full Name (Last, First, Middle Initial) MR. ALVIN CARPENTER	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 12440 MANDARIN ROAD	Transaction ID: SA11.13977658
	City State Zip Code JACKSONVILLE FL 32223	Amount of Each Receipt this Period 2600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer CSX	Occupation RETIRED	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2600.00	

C.	Full Name (Last, First, Middle Initial) MR. SUMIR CHADHA	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 1440 OAK RIM DRIVE	Transaction ID: SA11.13977637
	City State Zip Code HILLSBOROUGH CA 94010-7356	Amount of Each Receipt this Period 30400.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer GRANITE CAPITAL	Occupation EXECUTIVE	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 30400.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2611 / 3187
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. ARCHIBALD COX	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 352 7TH AVENUE STE. 1501	Transaction ID: SA11.13977641
	City State Zip Code NEW YORK NY 10001	Amount of Each Receipt this Period 600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
	Name of Employer Occupation BARCLAYS INFORMATION REQUESTED PER BEST EFFORTS	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

B.	Full Name (Last, First, Middle Initial) MR. ALFONSE M. D'AMATO	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 101 PARK AVENUE SUITE 2506	Transaction ID: SA11.13977652
	City State Zip Code NEW YORK NY 10178	Amount of Each Receipt this Period 2600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
	Name of Employer Occupation PARK STRATEGIES CONSULTANT	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2600.00	

C.	Full Name (Last, First, Middle Initial) MR. JOSEPH DAVIDSOHN	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 9455 COLLINS AVENUE 508	Transaction ID: SA11.13977634
	City State Zip Code SURFSIDE FL 33154	Amount of Each Receipt this Period 22600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 22600.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2612 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. PATRICK DURKIN	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 132 E. 72ND STREET	Transaction ID: SA11.13977627
	City State Zip Code NEW YORK NY 10021	Amount of Each Receipt this Period 7600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer BARCLAYS CAPITAL	Occupation MANAGING DIRECTOR	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7600.00	

B.	Full Name (Last, First, Middle Initial) MR. STEPHEN FRIEDMAN	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address ONE BEEKMAN PLACE	Transaction ID: SA11.13977631
	City State Zip Code NEW YORK NY 10022	Amount of Each Receipt this Period 12600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer STONE POINT CAPITAL	Occupation CHAIRMAN	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 12600.00	

C.	Full Name (Last, First, Middle Initial) MR. JAMES HAGEDORN	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 3085 SE SAINT LUCIE BLVD.	Transaction ID: SA11.13977620
	City State Zip Code STUART FL 34997	Amount of Each Receipt this Period 4000.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer SCOTTS COMPANY	Occupation CEO	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4000.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2613 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JOSEPH HARDY

Mailing Address P.O. BOX 584
ROUTE 519

City State Zip Code
EIGHTY FOUR PA 15384

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
84 LUMBER COMPANY CHIEF EXECUTIVE OFFICER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt
MM / DD / YYYY
11 / 03 / 2010

Transaction ID: SA11.13977649

Amount of Each Receipt this Period
2400.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
MR. AKASH JAIN

Mailing Address 315 HOVER AVENUE
#308

City State Zip Code
PALO ALTO CA 94301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PALANTIR TECHNOLOGIES, IN-C. SOFTWARE EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
11 / 03 / 2010

Transaction ID: SA11.13977642

Amount of Each Receipt this Period
600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MR. LESLIE LAMPTON

Mailing Address P.O. BOX 2401

City State Zip Code
JACKSON MS 39225

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1600.00

Date of Receipt
MM / DD / YYYY
11 / 03 / 2010

Transaction ID: SA11.13977646

Amount of Each Receipt this Period
1600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶ 0.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2614 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. G. MACDONALD	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 2951 FALL CREEK	Transaction ID: SA11.13977677
	City State Zip Code KERRVILLE TX 78028	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
	Name of Employer Occupation MACDONALD COMPANIES HOMEBUILDER	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

B.	Full Name (Last, First, Middle Initial) MR. EDDIE MARTIN	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 12309 MUHLY COVE	Transaction ID: SA11.13977624
	City State Zip Code AUSTIN TX 78738	Amount of Each Receipt this Period 5100.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
	Name of Employer Occupation TILSON HOME CORPORATION HOMEBUILDER	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5100.00	

C.	Full Name (Last, First, Middle Initial) MR. ROBERT MCGREW	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 678 HOMER AVENUE	Transaction ID: SA11.13977643
	City State Zip Code PALO ALTO CA 94301	Amount of Each Receipt this Period 600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
	Name of Employer Occupation PALANTIR TECHNOLOGIES DIRECTOR OF ENGINEERING	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2615 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. THOMAS MICHAUD

Mailing Address 45 RIDGEVIEW AVENUE

City State Zip Code
GREENWICH CT 06830

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
KBW, INC. FINANCE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2600.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13977657

Amount of Each Receipt this Period
2600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
MR. TOMMY PAYNE

Mailing Address 121 WARWICK GREEN ROAD

City State Zip Code
WINSTON SALEM NC 27104-1945

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NICONOVUM USA, INC. PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2600.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13977650

Amount of Each Receipt this Period
2500.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MR. JOHN RICKETTS

Mailing Address 607 UPPER HOBACK RIVER ROAD
P.O. BOX 320

City State Zip Code
LITTLE JACKSON HOL WY 82922

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 22600.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13977636

Amount of Each Receipt this Period
22600.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶ 0.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2616 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. JOE ROBSON	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 6565 S. TIMBERLANE	Transaction ID: SA11.13977630
	City State Zip Code TULSA OK 74136	Amount of Each Receipt this Period 12600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer THE ROBSON CO.	Occupation REAL ESTATE	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 12600.00	

B.	Full Name (Last, First, Middle Initial) MR. MATTHEW ROSE	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 1110 POST OAK PLACE	Transaction ID: SA11.13977628
	City State Zip Code WESTLAKE TX 76262	Amount of Each Receipt this Period 7600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer BNSF RAILWAY COMPANY	Occupation CEO	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7600.00	

C.	Full Name (Last, First, Middle Initial) MR. MICHAEL SHAH	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 845 UNITED NATIONS PLAZA APT. 35E	Transaction ID: SA11.13977653
	City State Zip Code NEW YORK NY 10017	Amount of Each Receipt this Period 2600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer DEL SHAH CAPITAL	Occupation CEO	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2600.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2617 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. BRUCE SOLL	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 141 DREXEL AVENUE	Transaction ID: SA11.13977621
	City State Zip Code BEXLEY OH 43209	Amount of Each Receipt this Period 4100.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer LIMITED BRANDS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4100.00	

B.	Full Name (Last, First, Middle Initial) MR. J. SPAINHOUR	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 6175 CHAPELLE CIRCLE	Transaction ID: SA11.13977651
	City State Zip Code MEMPHIS TN 38120	Amount of Each Receipt this Period 2600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2600.00	

C.	Full Name (Last, First, Middle Initial) MR. RICHARD EDWARD THORNBURGH	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 925 PARK AVENUE APT. 5C	Transaction ID: SA11.13977633
	City State Zip Code NEW YORK NY 10028	Amount of Each Receipt this Period 22600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer CORSAIR CAPITAL	Occupation PRIVATE EQUITY INVESTOR	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 22600.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2618 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DR. RICHARD TUISSANT	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 3712 EUCLID AVE.	Transaction ID: SA11.13977659
	City State Zip Code DALLAS TX 75205	Amount of Each Receipt this Period 2600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer PHYSICIAN	Occupation SELF	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2600.00	

B.	Full Name (Last, First, Middle Initial) MR. WILLIAM WELD	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 121 EAST 61ST STREET	Transaction ID: SA11.13977656
	City State Zip Code NEW YORK NY 10065	Amount of Each Receipt this Period 2600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer MCDERMOTT, WILL, & EMAY	Occupation LAWYER	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2600.00	

C.	Full Name (Last, First, Middle Initial) MR. MICHAEL ZINK	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 166 LEGEND ROCK ROAD	Transaction ID: SA11.13977635
	City State Zip Code WAKEFIELD RI 02879	Amount of Each Receipt this Period 22600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: BOEHNER FOR SPEAKER
Name of Employer CITIGROUP	Occupation BANKER	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 22600.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2619 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
AGRICULTURE FOR GOOD GOV. PAC
Mailing Address P.O. BOX 182383

City State Zip Code
COLUMBUS OH 43218

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 11 / 03 / 2010
Transaction ID: SA11.13977645
Amount of Each Receipt this Period: 1500.00
JFC ATTRIBUTION: BOEHNER FOR SPEAKER
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
AMERICAN RENTAL ASSOCIATION PAC
Mailing Address 1900 19TH STREET SUITE 400

City State Zip Code
MOLINE IL 61265

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt: 11 / 03 / 2010
Transaction ID: SA11.13977678
Amount of Each Receipt this Period: 200.00
JFC ATTRIBUTION: BOEHNER FOR SPEAKER
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
NATIONWIDE MUTUAL INSURANCE CO PAC
Mailing Address ONE NATIONWIDE PLAZA 1-32-06

City State Zip Code
COLUMBUS OH 43215

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt: 11 / 03 / 2010
Transaction ID: SA11.13977629
Amount of Each Receipt this Period: 10000.00
JFC ATTRIBUTION: BOEHNER FOR SPEAKER
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► 0.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2620 / 3187
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
NEW AMERICA HOLDINGS INC. FOX PAC

Mailing Address 444 N. CAPITOL STREET
STE. 740

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 11 / 03 / 2010
Transaction ID: SA11.13977640
Amount of Each Receipt this Period: 500.00
JFC ATTRIBUTION: BOEHNER FOR SPEAKER
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
PINNACLE WEST PAC

Mailing Address 400 N. 5TH STREET

City PHOENIX State AZ Zip Code 85004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 11 / 03 / 2010
Transaction ID: SA11.13977647
Amount of Each Receipt this Period: 2000.00
JFC ATTRIBUTION: BOEHNER FOR SPEAKER
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
PORTMAN FOR SENATE COMMITTEE

Mailing Address 986 ARCHER LANE

City DUBLIN State OH Zip Code 43017

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt: 11 / 03 / 2010
Transaction ID: SA11.13977619
Amount of Each Receipt this Period: 3000.00
JFC ATTRIBUTION: BOEHNER FOR SPEAKER
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶ 0.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2621 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
SCOTTS PAC

Mailing Address 14111 SCOTTSLAWN ROAD

City State Zip Code
MARYSVILLE OH 43040

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13977622

Amount of Each Receipt this Period
5000.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
SERVICEMASTER GOOD GOV. FUND

Mailing Address 860 RIDGE LAKE BLVD.

City State Zip Code
MEMPHIS TN 38120

FEC ID number of contributing federal political committee. **C** C00331363

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 7000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13977626

Amount of Each Receipt this Period
7000.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
TENET HEALTHCARE CORP. PAC

Mailing Address 1445 ROSS AVENUE
SUITE 1400

City State Zip Code
DALLAS TX 75202

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.13977623

Amount of Each Receipt this Period
5000.00

JFC ATTRIBUTION: BOEHNER FOR SPEAKER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2622 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
BROUN FREEDOM FUND
Mailing Address 264 N. LUMPKIN ST., #202
City ATHENS State GA Zip Code 30601
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 64534.51
Date of Receipt 10 / 15 / 2010
Transaction ID: SA12.BFF001
Amount of Each Receipt this Period 17000.00
TRANSFER OF JOINT FUNDRAISING PROCEEDS

B. Full Name (Last, First, Middle Initial)
DIANE BROWN
Mailing Address 142 AMILEE GRAVES CIR.
City CLARKESVILLE State GA Zip Code 30523-5616
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
NORTON AGENCY REAL ESTATE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 8500.00
Date of Receipt 10 / 15 / 2010
Transaction ID: SA12.13958126
Amount of Each Receipt this Period 8500.00
JFC ATTRIBUTION: BROUN FREEDOM FUND
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MR. FRANKLIN BROWN
Mailing Address 142 AMILEE GRAVES CIR.
City CLARKESVILLE State GA Zip Code 30523-5616
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
DIXIE PRECAST MANUFACTURING
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 8500.00
Date of Receipt 10 / 15 / 2010
Transaction ID: SA12.13958127
Amount of Each Receipt this Period 8500.00
JFC ATTRIBUTION: BROUN FREEDOM FUND
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► 17000.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2623 / 3187

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
BROUN FREEDOM FUND

Mailing Address 264 N. LUMPKIN ST., #202

City State Zip Code
ATHENS GA 30601

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 64534.51

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA12.BFF002

Amount of Each Receipt this Period

583.62

TRANSFER OF JOINT FUNDRAISING PROCEEDS

B.

Full Name (Last, First, Middle Initial)
KRISTY BROWN

Mailing Address 4160 EQING

City State Zip Code
AUSTELL GA 30106

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13977610

Amount of Each Receipt this Period

600.00

JFC ATTRIBUTION: BROUN FREEDOM FUND

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
CANTOR VICTORY FUND

Mailing Address 25 E. MAIN STREET

City State Zip Code
RICHMOND VA 23219

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 613367.03

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA12.CVF001

Amount of Each Receipt this Period

31818.48

TRANSFER OF JOINT FUNDRAISING PROCEEDS

SUBTOTAL of Receipts This Page (optional) ▶

32402.10

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2624 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. BENY ALAGEM
Mailing Address 1601 CLOVERFIELD BLVD., STE. 300 S
City State Zip Code
SANTA MONICA CA 90404-4085
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
ALAGEM CAPITAL GROUP CHAIRMAN & CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 24500.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0
Transaction ID: SA12.13958161
Amount of Each Receipt this Period 24500.00
JFC ATTRIBUTION: CANTOR VICTORY FUND
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
MR. ALEXANDER NAVAB
Mailing Address 9 WEST 57TH STREET, SUITE 4200
SUITE 4200
City State Zip Code
NEW YORK NY 10019-2701
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
KOHLBERG KRAVIS ROBERTS INVESTMENTS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10200.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0
Transaction ID: SA12.13958160
Amount of Each Receipt this Period 10000.00
JFC ATTRIBUTION: CANTOR VICTORY FUND
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
GREGORY SLAMOWITZ
Mailing Address 137 RIVERSIDE DRIVE
City State Zip Code
NEW YORK NY 10024-3702
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
AMBROSE CO-CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2600.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0
Transaction ID: SA12.13958159
Amount of Each Receipt this Period 2600.00
JFC ATTRIBUTION: CANTOR VICTORY FUND
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► 0.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2625 / 3187

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
CANTOR VICTORY FUND

Mailing Address 25 E. MAIN STREET

City State Zip Code
RICHMOND VA 23219

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
613367.03

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA12.CVF002

Amount of Each Receipt this Period

42847.96

TRANSFER OF JOINT FUNDRAISING PROCEEDS

B.

Full Name (Last, First, Middle Initial)
JENNIFER LIPSCHULTZ

Mailing Address 9 WEST 57TH STREET
SUITE 4200

City State Zip Code
NEW YORK NY 99999

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13977602

Amount of Each Receipt this Period

2600.00

JFC ATTRIBUTION: CANTOR VICTORY FUND

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
MARC LIPSCHULTZ

Mailing Address 9 WEST 57TH STREET
SUITE 4200

City State Zip Code
NEW YORK NY 99999

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
KOHLBERG, KRAVIS, ROBERTS & CO EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13977601

Amount of Each Receipt this Period

10000.00

JFC ATTRIBUTION: CANTOR VICTORY FUND

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

42847.96

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2626 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) KENNETH MEHLMAN	Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address 9 WEST 57TH STREET SUITE 4200	Transaction ID: SA11.13977603
	City NEW YORK State NY Zip Code 99999	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: CANTOR VICTORY FUND
	Name of Employer KOHLBERG, KRAVIS, ROBERTS & CO Occupation EXECUTIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) INGEBORG RENNERT	Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address ONE ROCKEFELLER PLAZA 29TH FLOOR	Transaction ID: SA11.13977606
	City NEW YORK State NY Zip Code 99999	Amount of Each Receipt this Period 30400.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: CANTOR VICTORY FUND
	Name of Employer HOMEMAKER Occupation HOMEMAKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 30400.00	[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) IRA RENNERT	Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address ONE ROCKEFELLER PLAZA 29TH FLOOR	Transaction ID: SA11.13977605
	City NEW YORK State NY Zip Code 99999	Amount of Each Receipt this Period 1600.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: CANTOR VICTORY FUND
	Name of Employer THE RENCO GROUP, INC. Occupation CHAIRMAN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1600.00	[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2627 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
CAROLE WEINSTEIN
 Mailing Address 2 JOHN CHRISTOPHER COURT
 City State Zip Code
 RICHMOND VA 99999
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HOMEMAKER HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 1 / 2 0 1 0
Transaction ID: SA11.13977604
 Amount of Each Receipt this Period
 500.00
 JFC ATTRIBUTION: CANTOR VICTORY FUND
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
SAMUEL ZELL
 Mailing Address 2N. RIVERSIDE PLAZA SUITE 600
 City State Zip Code
 CHICAGO IL 99999
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 EQUITY GROUP INVESTMENTS CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4800.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 1 / 2 0 1 0
Transaction ID: SA11.13977607
 Amount of Each Receipt this Period
 4800.00
 JFC ATTRIBUTION: CANTOR VICTORY FUND
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
CONGRESSIONAL TRUST 2010
 Mailing Address 228 S WASHINGTON STREET SUITE 115
 City State Zip Code
 ALEXANDRIA VA 22314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 163744.06
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 4 / 2 0 1 0
Transaction ID: SA12.CT001
 Amount of Each Receipt this Period
 90143.90
 TRANSFER OF JOINT FUNDRAISING PROCEEDS

SUBTOTAL of Receipts This Page (optional) ► **90143.90**
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2628 / 3187

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
JOHN AVELLINO

Mailing Address 35 MASON STREET

City State Zip Code
GREENWICH CT 06830-5433

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ZEICHNER ELLMAN & KRAUSE MANAGING PARTNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 125.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958018

Amount of Each Receipt this Period

125.00

JFC ATTRIBUTION: CONGRESSIONAL TRUST 201

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
LANCE BAKROW

Mailing Address 130 FIELD POINT CIRCLE

City State Zip Code
GREENWICH CT 06830-7071

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GREENWICH POWER ENERGY EXECUTIVE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 50.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958198

Amount of Each Receipt this Period

50.00

JFC ATTRIBUTION: CONGRESSIONAL TRUST 201

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
JEANNE BENNETT

Mailing Address 31 PERRYRIDGE ROAD

City State Zip Code
GREENWICH CT 06830-4607

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ROUND HILL NURSERY SCHOOL TEACHER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2.50

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958197

Amount of Each Receipt this Period

2.50

JFC ATTRIBUTION: CONGRESSIONAL TRUST 201

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2629 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ROBERT BISHOP

Mailing Address 503 SILVERMINE ROAD

City State Zip Code
NEW CANAAN CT 06840-4320

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
IMPALA ASSET MANAGEMENT PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958183

Amount of Each Receipt this Period
5000.00

JFC ATTRIBUTION: CONGRESSIONAL TRUST 201

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
ALAN BREED

Mailing Address 34 ROCK RIDGE ROAD

City State Zip Code
GREENWICH CT 06831-4441

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RIDGWOOD MANAGEMENT, LLC INVESTMENTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 15200.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958184

Amount of Each Receipt this Period
15200.00

JFC ATTRIBUTION: CONGRESSIONAL TRUST 201

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
JENNE BRITELL

Mailing Address 166 CALLE VENTOSO W.

City State Zip Code
SANTA FE NM 87506-7731

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CROWN HOLDINGS, LLC DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 125.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958185

Amount of Each Receipt this Period
125.00

JFC ATTRIBUTION: CONGRESSIONAL TRUST 201

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► **0.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2630 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CHARLES CAREY	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 61 SUMMERSWEET ROAD	Transaction ID: SA12.13958000
	City State Zip Code NEW CANAAN CT 06840-2240	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: CONGRESSIONAL TRUST 201
	Name of Employer Occupation DIRECT TV CHAIRMAN & CEO	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

B.	Full Name (Last, First, Middle Initial) JAN CHAPMAN	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 22 GARTON PLAZA	Transaction ID: SA12.13958008
	City State Zip Code WESTON WV 26452-2129	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: CONGRESSIONAL TRUST 201
	Name of Employer Occupation KEY OIL COMPANY OWNER & PRESIDENT	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) CASEY COWELL	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 211 N. CLINTON ST. SUITE 2N	Transaction ID: SA12.13958012
	City State Zip Code CHICAGO IL 60661-1283	Amount of Each Receipt this Period 15200.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: CONGRESSIONAL TRUST 201
	Name of Employer Occupation DURANDAL, INC. PRESIDENT	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15200.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2631 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
PETER DAPUZZO

Mailing Address 16 PILOT ROCK LANE

City State Zip Code
RIVERSIDE CT 06878-2621

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958182

Amount of Each Receipt this Period
1250.00

JFC ATTRIBUTION: CONGRESSIONAL TRUST 201

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
MR. NATHANIEL B. DAY

Mailing Address 1 HILLSIDE DRIVE

City State Zip Code
GREENWICH CT 06830-4751

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PRIVATE INVESTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958196

Amount of Each Receipt this Period
250.00

JFC ATTRIBUTION: CONGRESSIONAL TRUST 201

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
JORDAN DORFMAN

Mailing Address 18 E. DIVISION #2

City State Zip Code
CHICAGO IL 60610-2326

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CHICAGO MEAT AUTHORITY, INC. SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 125.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958013

Amount of Each Receipt this Period
125.00

JFC ATTRIBUTION: CONGRESSIONAL TRUST 201

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► 0.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2632 / 3187

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
BRODY DOUGLAS

Mailing Address 93 LEONARD STREET
APT. 5

City State Zip Code
NEW YORK NY 10013-3458

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
KOHLBERG KRAVIS & ROBERTS FINANCIAL ADVISOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 50.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958192

Amount of Each Receipt this Period

50.00

JFC ATTRIBUTION: CONGRESSIONAL TRUST 201

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
BRIAN FITZGERALD

Mailing Address 8 GREENWICH OFFICE PARK
SUITE 3

City State Zip Code
GREENWICH CT 06831-5149

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CAPITAL PARTNERS INVESTMENTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958028

Amount of Each Receipt this Period

1250.00

JFC ATTRIBUTION: CONGRESSIONAL TRUST 201

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
BRIAN FITZGERALD

Mailing Address 8 GREENWICH OFFICE PARK
SUITE 3

City State Zip Code
GREENWICH CT 06831-5149

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CAPITAL PARTNERS INVESTMENTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958191

Amount of Each Receipt this Period

250.00

JFC ATTRIBUTION: CONGRESSIONAL TRUST 201

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2633 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial) L. SCOTT FRANTZ		Date of Receipt MM / DD / YYYY 10 / 14 / 2010
Mailing Address 8 SOUND SHORE DRIVE		Transaction ID: SA12.13958181
City GREENWICH	State CT	Zip Code 06830-7242
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer HAEBLER CAPITAL	Occupation PRESIDENT	JFC ATTRIBUTION: CONGRESSIONAL TRUST 201
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial) LILE GIBBONS		Date of Receipt MM / DD / YYYY 10 / 14 / 2010
Mailing Address 27 SUNSET ROAD		Transaction ID: SA12.13958020
City OLD GREENWICH	State CT	Zip Code 06870-2109
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer STATE OF CONNECTICUT	Occupation STATE LEGISLATOR	JFC ATTRIBUTION: CONGRESSIONAL TRUST 201
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial) ALEXANDER GLAZER		Date of Receipt MM / DD / YYYY 10 / 14 / 2010
Mailing Address 17 HUSTED LANE		Transaction ID: SA12.13958187
City GREENWICH	State CT	Zip Code 06830-4730
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED	JFC ATTRIBUTION: CONGRESSIONAL TRUST 201
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5.00	[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2634 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CHARLES L. GLAZER

Mailing Address 17 HUSTED LANE

City State Zip Code
GREENWICH CT 06830-4730

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
C.L. GLAZER & COMPANY PRESIDENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1100.39

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13957999

Amount of Each Receipt this Period
1095.39

JFC ATTRIBUTION: CONGRESSIONAL TRUST 201

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
LINDSAY GLAZER

Mailing Address 17 HUSTED LANE

City State Zip Code
GREENWICH CT 06830-4730

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED ENTREPRENEUR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 25.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958190

Amount of Each Receipt this Period
25.00

JFC ATTRIBUTION: CONGRESSIONAL TRUST 201

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
GORDON HARTOGENSIS

Mailing Address 67 HARBOR DRIVE

City State Zip Code
GREENWICH CT 06830-7019

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AURIC TECHNOLOGY CEO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958027

Amount of Each Receipt this Period
1000.00

JFC ATTRIBUTION: CONGRESSIONAL TRUST 201

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► **0.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2635 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. EDWIN HODGE

Mailing Address 111 OXFORD ROAD

City State Zip Code
KENILWORTH IL 60043-1206

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MORGAN STANLEY SMITH BARN- INVESTMENT SALES
EY

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958005

Amount of Each Receipt this Period
500.00

JFC ATTRIBUTION: CONGRESS-
IONAL TRUST 201

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
MR. THOMAS E. JECKERING

Mailing Address 7720 MAYFIELD ROAD

City State Zip Code
GATES MILLS OH 44040-8601

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4166.67

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958001

Amount of Each Receipt this Period
2500.00

JFC ATTRIBUTION: CONGRESS-
IONAL TRUST 201

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
HERSCH KLAFF

Mailing Address 150 RAVINE GLADE STREET

City State Zip Code
GLENCOE IL 60022-1712

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
KLAFF REALTY, LP MANAGING DIRECTOR

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958014

Amount of Each Receipt this Period
5000.00

JFC ATTRIBUTION: CONGRESS-
IONAL TRUST 201

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2636 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
LIZ KURANTOWICZ

Mailing Address 244 GRISWOLD DRIVE

City State Zip Code
WEST HARTFORD CT 06119-1023

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CONNECTICUT REPUBLICAN PARTY CHIEF OF STAFF

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 12.50

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958189

Amount of Each Receipt this Period
12.50

JFC ATTRIBUTION: CONGRESSIONAL TRUST 201

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
LARRY LAWRENCE

Mailing Address 40 BROOKRIDGE DRIVE

City State Zip Code
GREENWICH CT 06830-4830

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ALLEGRA CAPITAL PARTNERS INVESTMENT MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958029

Amount of Each Receipt this Period
1250.00

JFC ATTRIBUTION: CONGRESSIONAL TRUST 201

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
NEIL MACKENZIE

Mailing Address 22 LANTERN DRIVE

City State Zip Code
RIDGEFIELD CT 06877-3413

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
THE BELLE HAVEN CLUB GENERAL MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 109.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958194

Amount of Each Receipt this Period
109.00

JFC ATTRIBUTION: CONGRESSIONAL TRUST 201

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► **0.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2637 / 3187
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JEFFREY M. MACKINNON

Mailing Address 3753 OLIVER STREET NW

City State Zip Code
WASHINGTON DC 20015-2531

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RYAN, MACKINNON, VASAPOLI PARTNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958002

Amount of Each Receipt this Period
250.00

JFC ATTRIBUTION: CONGRESSIONAL TRUST 201

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
MR. BARRY MACLEAN

Mailing Address 1000 ALLANSON ROAD

City State Zip Code
MUNDELEIN IL 60060-3804

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MACLEAN-FOGG COMPANY PRESIDENT & CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958009

Amount of Each Receipt this Period
5000.00

JFC ATTRIBUTION: CONGRESSIONAL TRUST 201

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
ROSS MANIRE

Mailing Address 665 PLUMTREE ROAD

City State Zip Code
GLEN ELLYN IL 60137-4234

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EXTENET SYSTEMS, INC. PRESIDENT & CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958021

Amount of Each Receipt this Period
500.00

JFC ATTRIBUTION: CONGRESSIONAL TRUST 201

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► 0.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2638 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. PETER MASON	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 311 S. WACKER DRIVE SUITE 3000	Transaction ID: SA12.13958010
	City State Zip Code CHICAGO IL 60606-6683	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: CONGRESSIONAL TRUST 201
	Name of Employer Occupation FREEBORN & PETERS ATTORNEY	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15200.00	

B.	Full Name (Last, First, Middle Initial) MR. PETER MASON	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 311 S. WACKER DRIVE SUITE 3000	Transaction ID: SA12.13958011
	City State Zip Code CHICAGO IL 60606-6683	Amount of Each Receipt this Period 14700.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: CONGRESSIONAL TRUST 201
	Name of Employer Occupation FREEBORN & PETERS ATTORNEY	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15200.00	

C.	Full Name (Last, First, Middle Initial) MR CHRISTINE MEEK	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 20 MIDDLE RIDGE ROAD	Transaction ID: SA12.13958193
	City State Zip Code STAMFORD CT 06903-4026	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: CONGRESSIONAL TRUST 201
	Name of Employer Occupation ROBUSTELLI MERCHANDISE SV-CS. MARKETING	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2639 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DONALD K. MILLER

Mailing Address 588 ROUND HILL ROAD

City State Zip Code
GREENWICH CT 06831-2724

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AXIOM INTERNATIONAL INVESTORS ASSET MANAGEMENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 5500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958022

Amount of Each Receipt this Period
500.00

JFC ATTRIBUTION: CONGRESSIONAL TRUST 201

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
K. RUPERT MURDOCH

Mailing Address 444 NORTH CAPITOL ST. NW
SUITE 740

City State Zip Code
WASHINGTON DC 20001-1512

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NEWS CORPORATION CHAIRMAN & CEO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958003

Amount of Each Receipt this Period
2500.00

JFC ATTRIBUTION: CONGRESSIONAL TRUST 201

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
PETER ORTHWEIN

Mailing Address 154 GUARDS ROAD

City State Zip Code
GREENWICH CT 06831-2737

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
THOR INDUSTRIES, INC. VICE-CHAIRMAN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958023

Amount of Each Receipt this Period
500.00

JFC ATTRIBUTION: CONGRESSIONAL TRUST 201

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶ 0.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2640 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial) CHRISTIAN OVERBECK		Date of Receipt MM / DD / YYYY 10 / 14 / 2010
Mailing Address 630 LAKE AVENUE		Transaction ID: SA12.13958180
City GREENWICH	State CT	Zip Code 06830-3854
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1250.00
Name of Employer SARATOGA PARTNERS	Occupation INVESTMENT MANAGER	JFC ATTRIBUTION: CONGRESSIONAL TRUST 201
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial) CHARLES PERUCHINI		Date of Receipt MM / DD / YYYY 10 / 14 / 2010
Mailing Address 2150 N. LINCOLN PARK WEST #1309		Transaction ID: SA12.13958006
City CHICAGO	State IL	Zip Code 60614-4647
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer NAVIGANT	Occupation CONSULTANT	JFC ATTRIBUTION: CONGRESSIONAL TRUST 201
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial) SHARON PHILLIPS		Date of Receipt MM / DD / YYYY 10 / 14 / 2010
Mailing Address 6 HYCLIFF ROAD		Transaction ID: SA12.13958007
City GREENWICH	State CT	Zip Code 06831-3223
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer HOMEMAKER	Occupation HOMEMAKER	JFC ATTRIBUTION: CONGRESSIONAL TRUST 201
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2641 / 3187
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ROBERT PLATT

Mailing Address 226 KENMORE AVENUE

City State Zip Code
ELMHURST IL 60126-3520

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MOSTARDI PLATT ENVIRONMENTAL ENVIRONMENTAL CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958017

Amount of Each Receipt this Period
5000.00

JFC ATTRIBUTION: CONGRESSIONAL TRUST 201

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
SHARON PROPST

Mailing Address 353 CAROLINA PINES BLVD.

City State Zip Code
NEW BERN NC 28560-8483

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958188

Amount of Each Receipt this Period
5.00

JFC ATTRIBUTION: CONGRESSIONAL TRUST 201

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
PATRICIA READ

Mailing Address 65 GILLIAM LANE

City State Zip Code
RIVERSIDE CT 06878-2215

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958186

Amount of Each Receipt this Period
500.00

JFC ATTRIBUTION: CONGRESSIONAL TRUST 201

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2642 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MELISSA SALAME	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 16 HEDGEROW LANE	Transaction ID: SA12.13958024
	City State Zip Code GREENWICH CT 06831-3340	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: CONGRESSIONAL TRUST 201
	Name of Employer Occupation B* CURED FOUNDER	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) GEORGE SCHIELE	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 19 HILL ROAD	Transaction ID: SA12.13958025
	City State Zip Code GREENWICH CT 06830-4025	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: CONGRESSIONAL TRUST 201
	Name of Employer Occupation G.W. SCHIELE INVESTMENTS, INC. INVESTOR	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) KEVIN SWAN	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 70 EAST WALTON	Transaction ID: SA12.13958015
	City State Zip Code CHICAGO IL 60611-1670	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: CONGRESSIONAL TRUST 201
	Name of Employer Occupation WATER STREET HEALTHCARE PARTNER	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2643 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ELIZABETH VERRILL

Mailing Address 320 FIRST STREET SE

City State Zip Code
WASHINGTON DC 20003-1838

FEC ID number of contributing federal political committee. **C**

Name of Employer NATIONAL REPUBLICAN CONGR-
SSIONAL COMM Occupation
FINANCE DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
12.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958195

Amount of Each Receipt this Period
12.50

JFC ATTRIBUTION: CONGRESS-
IONAL TRUST 201

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
JEFFREY WAMPLER

Mailing Address 1102 S. PROSPECT

City State Zip Code
CHAMPAIGN IL 61820-6322

FEC ID number of contributing federal political committee. **C**

Name of Employer ERWIN, MARTINKUS & COLE,
LTD. Occupation
ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958019

Amount of Each Receipt this Period
125.00

JFC ATTRIBUTION: CONGRESS-
IONAL TRUST 201

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MR. ROBERT E. WILBRETT

Mailing Address 5504 LAKESHORE ROAD

City State Zip Code
FORT GRATIOT MI 48059-2813

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation
INSURANCE CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958199

Amount of Each Receipt this Period
5.00

JFC ATTRIBUTION: CONGRESS-
IONAL TRUST 201

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2644 / 3187

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
RICHARD WOLDENBERG
Mailing Address 176 HASTINGS

City State Zip Code
HIGHLAND PARK IL 60035-5139

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LEARNING RESOURCES, INC. CHAIRMAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958016

Amount of Each Receipt this Period
1000.00

JFC ATTRIBUTION: CONGRESS-
IONAL TRUST 201

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
NANCY WOLF
Mailing Address 18 PINTAIL LANE

City State Zip Code
GREENWICH CT 06830-6722

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED HUMAN RESOURCES CONSULTANT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958026

Amount of Each Receipt this Period
500.00

JFC ATTRIBUTION: CONGRESS-
IONAL TRUST 201

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
PHYSICIAN HOSPITALS OF AMERICA PAC
Mailing Address 5900 SOUTH WESTERN AVENUE
SUITE 102

City State Zip Code
SIOUX FALLS SD 57108-5082

FEC ID number of contributing federal political committee. **C** C00394163

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958004

Amount of Each Receipt this Period
1500.00

JFC ATTRIBUTION: CONGRESS-
IONAL TRUST 201

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2645 / 3187

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
CONGRESSIONAL TRUST 2010

Mailing Address 228 S WASHINGTON STREET
SUITE 115

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 163744.06

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 1 0

Transaction ID: SA12.CT002

Amount of Each Receipt this Period

35561.36

TRANSFER OF JOINT FUNDRAISING PROCEEDS

B.

Full Name (Last, First, Middle Initial)
CHARLES KOCH

Mailing Address P.O. BOX 2556

City State Zip Code
WICHITA KS 67201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
KOCH INDUSTRIES CHAIRMAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 24500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 1 0

Transaction ID: SA11.13977550

Amount of Each Receipt this Period

24500.00

JFC ATTRIBUTION: CONGRESSIONAL TRUST 201

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
LEORA R. LEVY

Mailing Address 59 PECKSLAND ROAD

City State Zip Code
GREENWICH CT 06831

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1864.68

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 1 0

Transaction ID: SA11.13977543

Amount of Each Receipt this Period

1864.68

JFC ATTRIBUTION: CONGRESSIONAL TRUST 201

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

35561.36

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2646 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MR. STEVEN M. LEVY</p> <p>Mailing Address 59 PECKSLAND ROAD 59 PECKSLAND RD.</p> <p>City State Zip Code GREENWICH CT 06831</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation KAMBER MANAGEMENT CO., LLC REAL ESTATE DEVELOPER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1864.68</p>	<p>Date of Receipt MM / DD / YYYY 11 / 08 / 2010</p> <p>Transaction ID: SA11.13977544</p> <p>Amount of Each Receipt this Period 1864.68</p> <p>JFC ATTRIBUTION: CONGRESS- IONAL TRUST 201</p> <p>[MEMO ITEM]</p>
---	--

<p>B. Full Name (Last, First, Middle Initial) BRET MAXWELL</p> <p>Mailing Address 4011 BRITTANY COURT</p> <p>City State Zip Code NORTHBROOK IL 60062</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation MK CAPITAL VENTURE CAPITALIST</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 250.00</p>	<p>Date of Receipt MM / DD / YYYY 11 / 08 / 2010</p> <p>Transaction ID: SA11.13977546</p> <p>Amount of Each Receipt this Period 250.00</p> <p>JFC ATTRIBUTION: CONGRESS- IONAL TRUST 201</p> <p>[MEMO ITEM]</p>
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<p>C. Full Name (Last, First, Middle Initial) MOHAMMED ASHRAF QAZI</p> <p>Mailing Address 4000 TOWN CENTER</p> <p>City State Zip Code SOUTHFIELD MI 48075-1410</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation CIENA HEALTHCARE MANAGEME- NT PRESIDENT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 15200.00</p>	<p>Date of Receipt MM / DD / YYYY 11 / 08 / 2010</p> <p>Transaction ID: SA11.13977551</p> <p>Amount of Each Receipt this Period 7600.00</p> <p>JFC ATTRIBUTION: CONGRESS- IONAL TRUST 201</p> <p>[MEMO ITEM]</p>
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SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2647 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
TOM RAGLAND

Mailing Address 2 SPRING STREET

City RIVERSIDE State CT Zip Code 06878

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt 11 / 08 / 2010
Transaction ID: SA11.13977545
 Amount of Each Receipt this Period 100.00
 JFC ATTRIBUTION: CONGRESSIONAL TRUST 201
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
BRUCE TAYLOR

Mailing Address 9550 WEST HIGGINS ROAD

City ROSEMONT State IL Zip Code 60018

FEC ID number of contributing federal political committee. **C**

Name of Employer COLE TAYLOR BANK Occupation CHAIRMAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 08 / 2010
Transaction ID: SA11.13977549
 Amount of Each Receipt this Period 250.00
 JFC ATTRIBUTION: CONGRESSIONAL TRUST 201
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
CHARLES URSTADT

Mailing Address 321 RAILROAD AVENUE

City GREENWICH State CT Zip Code 06830

FEC ID number of contributing federal political committee. **C**

Name of Employer URSTADT BIDDLE PROPERTIES Occupation REAL ESTATE DEVELOPER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 08 / 2010
Transaction ID: SA11.13977547
 Amount of Each Receipt this Period 250.00
 JFC ATTRIBUTION: CONGRESSIONAL TRUST 201
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶ 0.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2648 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
PG&E CORP. EMPLOYEES ENERGY PAC

Mailing Address 77 BEALE STREET
MC B29H

City State Zip Code
SAN FRANCISCO CA 94105

FEC ID number of contributing federal political committee. **C** C00404079

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
MM / DD / YYYY
11 / 08 / 2010

Transaction ID: SA11.13977548

Amount of Each Receipt this Period
1250.00

JFC ATTRIBUTION: CONGRESSIONAL TRUST 201

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
DENT VICTORY FUND

Mailing Address PO BOX 365

City State Zip Code
MCLEAN VA 22101

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 16000.00

Date of Receipt
MM / DD / YYYY
11 / 03 / 2010

Transaction ID: SA12.DVF01

Amount of Each Receipt this Period
16000.00

TRANSFER OF JOINT FUNDRAISING PROCEEDS

C. Full Name (Last, First, Middle Initial)
MR. ROBERT J BENNETT

Mailing Address 970 N. 38TH ST.

City State Zip Code
ALLENTOWN PA 18104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JH BENNETT, INC. AUTO DEALER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt
MM / DD / YYYY
11 / 03 / 2010

Transaction ID: SA11.13977583

Amount of Each Receipt this Period
2400.00

JFC ATTRIBUTION: DENT VICTORY FUND

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► 16000.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2649 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ELIZABETH P BERGBOWER

Mailing Address INFO REQUESTED

City INFO REQUESTED State XX Zip Code 99999

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 11 / 03 / 2010
Transaction ID: SA11.13977582
 Amount of Each Receipt this Period: 400.00
 JFC ATTRIBUTION: DENT VICTORY FUND
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
JOHN R BIGGAR

Mailing Address 4674 BROOKRIDGE DR.

City CENTER VALLEY State PA Zip Code 18034

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 11 / 03 / 2010
Transaction ID: SA11.13977639
 Amount of Each Receipt this Period: 5000.00
 JFC ATTRIBUTION: DENT VICTORY FUND
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
CAROLYN A DAUB

Mailing Address 2800 N DELAWARE DR

City EASTON State PA Zip Code 18040

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3400.00

Date of Receipt: 11 / 03 / 2010
Transaction ID: SA11.13977587
 Amount of Each Receipt this Period: 2400.00
 JFC ATTRIBUTION: DENT VICTORY FUND
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶ 0.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2650 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) JOHN R LOVETT	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 2830 W LIBERTY ST	Transaction ID: SA11.13977585
	City State Zip Code ALLENTOWN PA 18104	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: DENT VICTORY FUND
	Name of Employer Occupation RETIRED RETIRED	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00	

B.	Full Name (Last, First, Middle Initial) JOHN F. MALLOY	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 2556 SPRING VALLEY RD.	Transaction ID: SA11.13977638
	City State Zip Code BETHLEHEM PA 18015	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: DENT VICTORY FUND
	Name of Employer Occupation VICTUALS CEO	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

C.	Full Name (Last, First, Middle Initial) R C MUIR	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 1600 LEHIGH PWHY E APT 5L	Transaction ID: SA11.13977586
	City State Zip Code ALLENTOWN PA 18103	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: DENT VICTORY FUND
	Name of Employer Occupation RETIRED RETIRED	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2651 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
WILLIAM A PETERS

Mailing Address 3576 NORTH DRIVE

City State Zip Code
BETHLEHEM PA 18015

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ST. LUKE'S HOSPITAL PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2850.00

Date of Receipt: 11 / 03 / 2010
Transaction ID: SA11.13977584
Amount of Each Receipt this Period: 2850.00
JFC ATTRIBUTION: DENT VICTORY FUND
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
DANIEL E SMITH

Mailing Address 102 ABBOTT RD.

City State Zip Code
WELLESLEY MA 02481

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SYCAMORE NETWORKS MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 11 / 03 / 2010
Transaction ID: SA11.13977581
Amount of Each Receipt this Period: 2500.00
JFC ATTRIBUTION: DENT VICTORY FUND
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
FOUNDERS JOINT CANDIDATE COMMITTEE

Mailing Address 288 S. WASHINGTON ST.
STE. 115

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 119708.23

Date of Receipt: 10 / 14 / 2010
Transaction ID: SA12.FJCC001
Amount of Each Receipt this Period: 47705.49
TRANSFER OF JOINT FUNDRAISING PROCEEDS

SUBTOTAL of Receipts This Page (optional) ► 47705.49

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2652 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. DOUGLAS F. ALLISON

Mailing Address 3707 W. MAPLE ROAD

City State Zip Code
BLOOMFIELD HILLS MI 48301-3212

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 14700.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958201

Amount of Each Receipt this Period
14700.00

JFC ATTRIBUTION: FOUNDERS
JOINT CANDIDAT

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
GEOFFREY BOISI

Mailing Address 280 PARK AVENUE
23RD FLOOR EAST

City State Zip Code
NEW YORK NY 10017-1216

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ROUNDTABLE INVESTMENT PARTNERS INVESTMENT BANKER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 20000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958200

Amount of Each Receipt this Period
20000.00

JFC ATTRIBUTION: FOUNDERS
JOINT CANDIDAT

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
MR. ROBERT V. PENNINGTON

Mailing Address 9 REDCOAT PASS

City State Zip Code
DARIEN CT 06820-6021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 10000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958202

Amount of Each Receipt this Period
10000.00

JFC ATTRIBUTION: FOUNDERS
JOINT CANDIDAT

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► 0.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2653 / 3187

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
JOSEPH SHIELDS

Mailing Address 140 BROADWAY

City State Zip Code
NEW YORK NY 10005-1108

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WELLINGTON SHIELDS & CO. CHAIRMAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958203

Amount of Each Receipt this Period

10000.00

JFC ATTRIBUTION: FOUNDERS
JOINT CANDIDAT

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
FOUNDERS JOINT CANDIDATE COMMITTEE

Mailing Address 288 S. WASHINGTON ST.
STE. 115

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 119708.23

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA12.FJCC002

Amount of Each Receipt this Period

18364.34

TRANSFER OF JOINT FUNDRAI-
SING PROCEEDS

C.

Full Name (Last, First, Middle Initial)
GREGORY FAZAKERLEY

Mailing Address P.O. BOX 955

City State Zip Code
MIDDLEBURG VA 20118-0955

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CG INVESTMENTS, INC. REAL ESTATE DEVELOPMENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA12.13958163

Amount of Each Receipt this Period

5000.00

JFC ATTRIBUTION: FOUNDERS
JOINT CANDIDAT

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶

18364.34

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2654 / 3187

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. KENNETH MEHLMAN

Mailing Address 9 WEST 57TH STREET
SUITE 4200

City State Zip Code
NEW YORK NY 10019-2701

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
KOHLBERG KRAVIS ROBERTS & CO. PARTNER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA12.13958164

Amount of Each Receipt this Period
5000.00

JFC ATTRIBUTION: FOUNDERS
JOINT CANDIDAT

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
CHRISTOPHER RUDDY

Mailing Address 1120 BEAR ISLAND DRIVE

City State Zip Code
WEST PALM BEACH FL 33409-2005

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NEWSMAX MEDIA, INC. CEO/PRESIDENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 10000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA12.13958162

Amount of Each Receipt this Period
10000.00

JFC ATTRIBUTION: FOUNDERS
JOINT CANDIDAT

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
FOUNDERS JOINT CANDIDATE COMMITTEE

Mailing Address 288 S. WASHINGTON ST.
STE. 115

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 119708.23

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 1 0

Transaction ID: SA12.FJCC003

Amount of Each Receipt this Period
15429.58

TRANSFER OF JOINT FUNDRAI-
SING PROCEEDS

SUBTOTAL of Receipts This Page (optional)	15429.58
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2655 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ALICE GOODWIN

Mailing Address 901 EAST CARY STREET
SUITE 1500

City Richmond State VA Zip Code 23219

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 13000.00

Date of Receipt 11 / 08 / 2010
Transaction ID: SA11.13977612
Amount of Each Receipt this Period 13000.00
JFC ATTRIBUTION: FOUNDERS JOINT CANDIDAT
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
WILLIAM GOODWIN

Mailing Address 901 EAST CARY STREET
SUITE 1500

City Richmond State VA Zip Code 23219

FEC ID number of contributing federal political committee. **C**

Name of Employer CCA INDUSTRIES, INC. Occupation CHAIRMAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4800.00

Date of Receipt 11 / 08 / 2010
Transaction ID: SA11.13977611
Amount of Each Receipt this Period 4800.00
JFC ATTRIBUTION: FOUNDERS JOINT CANDIDAT
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
GRAND CANYON STATE LEADERSHIP FUND

Mailing Address PO BOX 365

City MCLEAN State VA Zip Code 22101

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 15100.00

Date of Receipt 10 / 28 / 2010
Transaction ID: SA12.GCSLF01
Amount of Each Receipt this Period 11500.00
TRANSFER OF JOINT FUNDRAISING PROCEEDS

SUBTOTAL of Receipts This Page (optional) ► 11500.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2656 / 3187
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
WAYNE DESTEFANO

Mailing Address 15111 N PIMA RD
STE 200

City State Zip Code
SCOTTSDALE AZ 85260

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JAWA PARTNER

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5400.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13977675

Amount of Each Receipt this Period
5400.00

JFC ATTRIBUTION: GRAND CANYON STATE LEAD

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
JASON HOPE

Mailing Address 15111 N PIMA RD
STE 200

City State Zip Code
SCOTTSDALE AZ 85260

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JAWA PARTNER

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5400.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13977676

Amount of Each Receipt this Period
5400.00

JFC ATTRIBUTION: GRAND CANYON STATE LEAD

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
REX G MAUGHAN

Mailing Address P.O. BOX 85082

City State Zip Code
PHOENIX AZ 85082

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FOREVER LIVING PRODUCTS CEO

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5400.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.13977673

Amount of Each Receipt this Period
5400.00

JFC ATTRIBUTION: GRAND CANYON STATE LEAD

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► 0.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2657 / 3187
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
GRAND CANYON STATE LEADERSHIP FUND

Mailing Address PO BOX 365

City State Zip Code
MCLEAN VA 22101

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15100.00

Date of Receipt
MM / DD / YYYY
11 / 15 / 2010

Transaction ID: SA12.GCSLF02

Amount of Each Receipt this Period
3600.00

TRANSFER OF JOINT FUNDRAISING PROCEEDS

B. Full Name (Last, First, Middle Initial)
MS. PATRICK D. LLOYD

Mailing Address 11001 N 99TH AVE
#11634

City State Zip Code
PEORIA AZ 85345-5401

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100.00

Date of Receipt
MM / DD / YYYY
11 / 15 / 2010

Transaction ID: SA11.13977672

Amount of Each Receipt this Period
100.00

JFC ATTRIBUTION: GRAND CANYON STATE LEAD

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
GODADDY.COM INC. PAC

Mailing Address 14455 N HAYDEN ST
STE 219

City State Zip Code
SCOTTSDALE AZ 85260

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
MM / DD / YYYY
11 / 15 / 2010

Transaction ID: SA11.13977674

Amount of Each Receipt this Period
1250.00

JFC ATTRIBUTION: GRAND CANYON STATE LEAD

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► **3600.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2658 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) HARMER VICTORY COMMITTEE	Date of Receipt MM / DD / YYYY 11 / 12 / 2010
	Mailing Address PO BOX 365	Transaction ID: SA12HVC01
	City State Zip Code MCLEAN VA 22101	Amount of Each Receipt this Period 2250.00
	FEC ID number of contributing federal political committee. C	TRANSFER OF JOINT FUNDRAISING PROCEEDS
Name of Employer Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2250.00	

B.	Full Name (Last, First, Middle Initial) LYN A. WILCOX	Date of Receipt MM / DD / YYYY 11 / 12 / 2010
	Mailing Address 216 MEADOWSIDE PLACE	Transaction ID: SA12.LW001
	City State Zip Code DANVILLE CA 94526	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION:HARMER VICTORY COMMITTEE
Name of Employer Occupation INFO REQUESTED PER BEST EFFORTS	INFO REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) KEYSTONE MAJORITY FUND	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 288 S. WASHINGTON ST. STE. 115	Transaction ID: SA12.KMF001
	City State Zip Code ALEXANDRIA VA 22314	Amount of Each Receipt this Period 174000.00
	FEC ID number of contributing federal political committee. C	TRANSFER OF JOINT FUNDRAISING PROCEEDS
Name of Employer Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200000.00	

SUBTOTAL of Receipts This Page (optional)	▶	176250.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2659 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. JAMES J. ANDERSON	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	Mailing Address 205 LURGAN RD.	Transaction ID: SA11.13977573
	City State Zip Code NEW HOPE PA 18938	Amount of Each Receipt this Period 1250.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: KEYSTONE VICTORY FUND
Name of Employer ANDERSON CONSTRUCTION	Occupation CONSTRUCTION	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

B.	Full Name (Last, First, Middle Initial) ALFRED BARBOUR	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	Mailing Address 155 DARLINGTON LANE	Transaction ID: SA11.13977694
	City State Zip Code SEWICKLEY PA 15143	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: KEYSTONE VICTORY FUND
Name of Employer COMCAST	Occupation EXECUTIVE	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

C.	Full Name (Last, First, Middle Initial) MRS. JANICE E. BARENSFELD	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	Mailing Address 581 CHAPEL DR.	Transaction ID: SA11.13977598
	City State Zip Code ELLWOOD CITY PA 16117	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: KEYSTONE VICTORY FUND
Name of Employer HOMEMAKER	Occupation HOMEMAKER	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2660 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ALBERT N. BENINATO	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 124 PALISADE DR.	Transaction ID: SA11.13977591
	City State Zip Code FREEHOLD NJ 07728	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: KEYSTONE VICTORY FUND
	Name of Employer Occupation HATCH MOTT MCDONALD ENGINEER	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 125.00	

B.	Full Name (Last, First, Middle Initial) GREGORY BRENNAN	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 10 EASTWOOD LANE	Transaction ID: SA11.13977565
	City State Zip Code POTTSVILLE PA 17901	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: KEYSTONE VICTORY FUND
	Name of Employer Occupation ALFRED BENESCH & CO. ENGINEER	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) MRS. FLORENCE BRONDER	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 120 FREEDOM RD.	Transaction ID: SA11.13977575
	City State Zip Code BUTLER PA 16001	Amount of Each Receipt this Period 1850.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: KEYSTONE VICTORY FUND
	Name of Employer Occupation RETIRED RETIRED	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1850.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2661 / 3187
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
KENNETH BRONDER

Mailing Address

City State Zip Code
BUTLER PA 16001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BRONDER TECH SERVICES CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2450.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13977576
Amount of Each Receipt this Period: 2450.00
JFC ATTRIBUTION: KEYSTONE VICTORY FUND
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
ALAN H BUERGER

Mailing Address

City State Zip Code
99999

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13977687
Amount of Each Receipt this Period: 2500.00
JFC ATTRIBUTION: KEYSTONE VICTORY FUND
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
THOMAS A. CARAMANICO

Mailing Address 848 BUCK LANE

City State Zip Code
HAVERFORD PA 19041

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MCCORMICK & TAYLOR PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13977685
Amount of Each Receipt this Period: 2500.00
JFC ATTRIBUTION: KEYSTONE VICTORY FUND
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► 0.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2662 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) THOMAS A. CARAMANICO</p> <p>Mailing Address 848 BUCK LANE</p> <p>City State Zip Code HAVERFORD PA 19041</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation MCCORMICK & TAYLOR PRESIDENT</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 5000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 1 0</p> <p>Transaction ID: SA11.13977686</p> <p>Amount of Each Receipt this Period 2500.00</p> <p>JFC ATTRIBUTION: KEYSTONE VICTORY FUND</p> <p>[MEMO ITEM]</p>
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<p>B. Full Name (Last, First, Middle Initial) JOHN W. CONWAY</p> <p>Mailing Address 6059 STONEY HILL RD.</p> <p>City State Zip Code NEW HOPE PA 18938</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation CROWN CORK & SEAL CHAIRMAN</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 1 0</p> <p>Transaction ID: SA11.13977682</p> <p>Amount of Each Receipt this Period 2500.00</p> <p>JFC ATTRIBUTION: KEYSTONE VICTORY FUND</p> <p>[MEMO ITEM]</p>
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<p>C. Full Name (Last, First, Middle Initial) ANDRE V. DUGGIN</p> <p>Mailing Address 985 OLD EAGLE SCHOOL RD. STE. 504</p> <p>City State Zip Code WAYNE PA 19087</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AV INTERNATIONAL CHAIRMAN</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 1 0</p> <p>Transaction ID: SA11.13977564</p> <p>Amount of Each Receipt this Period 500.00</p> <p>JFC ATTRIBUTION: KEYSTONE VICTORY FUND</p> <p>[MEMO ITEM]</p>
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SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2663 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MATTHEW GARBER

Mailing Address 97 BYERS RD.

City OTTSVILLE State PA Zip Code 18942

FEC ID number of contributing federal political committee. **C**

Name of Employer CARROLL ENGINEERING Occupation ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 125.00

Date of Receipt 10 / 25 / 2010

Transaction ID: SA11.13977590

Amount of Each Receipt this Period 125.00

JFC ATTRIBUTION: KEYSTONE VICTORY FUND

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
DONALD GENNUSO

Mailing Address 16 TIMBERCREST CIRCLE

City CECIL State PA Zip Code 15321

FEC ID number of contributing federal political committee. **C**

Name of Employer SAI CONSULTING ENGINEERS Occupation PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 25 / 2010

Transaction ID: SA11.13977566

Amount of Each Receipt this Period 500.00

JFC ATTRIBUTION: KEYSTONE VICTORY FUND

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
SEAN W. GORMLEY

Mailing Address 2 SOUTH PEMBROKE AVENUE

City MARGATE CITY State NJ Zip Code 08402

FEC ID number of contributing federal political committee. **C**

Name of Employer NIA GROUP Occupation ASSOCIATE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 10 / 25 / 2010

Transaction ID: SA11.13977571

Amount of Each Receipt this Period 1200.00

JFC ATTRIBUTION: KEYSTONE VICTORY FUND

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶ 0.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2664 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
SEAN W. GORMLEY

Mailing Address 2 SOUTH PEMBROKE AVENUE

City MARGATE CITY State NJ Zip Code 08402

FEC ID number of contributing federal political committee. **C**

Name of Employer NIA GROUP Occupation ASSOCIATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13977589
Amount of Each Receipt this Period: 100.00
JFC ATTRIBUTION: KEYSTONE VICTORY FUND
[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
ROBERT HARMAN

Mailing Address 33 BARNSBURY RD.

City LANGHORNE State PA Zip Code 19047

FEC ID number of contributing federal political committee. **C**

Name of Employer NEW FRONTIER RISK SOLUTIONS Occupation CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13977567
Amount of Each Receipt this Period: 550.00
JFC ATTRIBUTION: KEYSTONE VICTORY FUND
[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
MYLES HARRINGTON

Mailing Address 2918 SKYLINE DR.

City ALLISON PARK State PA Zip Code 15101

FEC ID number of contributing federal political committee. **C**

Name of Employer GRANT STREET GROUP Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13977680
Amount of Each Receipt this Period: 2500.00
JFC ATTRIBUTION: KEYSTONE VICTORY FUND
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► 0.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2665 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ALAN P. HOFFMAN	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	Mailing Address 1703 EAST DR.	Transaction ID: SA11.13977695
	City State Zip Code VENTNOR NJ 08406	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: KEYSTONE VICTORY FUND
	Name of Employer Occupation VITETTA GROUP EXECUTIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) GLENN LEMUNYON	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	Mailing Address 410 CONSTITUTION AVE., NE	Transaction ID: SA11.13977592
	City State Zip Code WASHINGTON DC 20002	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: KEYSTONE VICTORY FUND
	Name of Employer Occupation LEMUNYON GROUP PRINCIPAL Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) MRS. ELSIE Y. LEWIS	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	Mailing Address 607 POIA RD.	Transaction ID: SA11.13977679
	City State Zip Code SEWICKLEY PA 15143	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: KEYSTONE VICTORY FUND
	Name of Employer Occupation HOMEMAKER HOMEMAKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00	[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2666 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) GEORGE LOGUE	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	Mailing Address 454 MOSTELLOR RD.	Transaction ID: SA11.13977594
	City State Zip Code TROUT RUN PA 17771	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: KEYSTONE VICTORY FUND
	Name of Employer Occupation GLENN O. HAWBAKER INC. CONTRACTOR	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) HERBERT E. LONG	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	Mailing Address 501 N. BETHLEHEM PL.	Transaction ID: SA11.13977563
	City State Zip Code SPRING HOUSE PA 19477	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: KEYSTONE VICTORY FUND
	Name of Employer Occupation LEGION DESIGN CAMPBELL CHAIRMAN	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) JON M. LUBERT	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	Mailing Address 341 S. 18TH ST.	Transaction ID: SA11.13977690
	City State Zip Code PHILADELPHIA PA 19103	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: KEYSTONE VICTORY FUND
	Name of Employer Occupation IL MANAGEMENT INC. EXECUTIVE	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2667 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JOHN F. MALLOY
Mailing Address 2556 SPRING VALLEY RD.
City State Zip Code
BETHLEHEM PA 18015
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
VICTUALS CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0
Transaction ID: SA11.13977692
Amount of Each Receipt this Period 5000.00
JFC ATTRIBUTION: KEYSTONE VICTORY FUND
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
MR. CLARK W. MARTIN
Mailing Address 918 ROELOFFS RD.
City State Zip Code
YARDLEY PA 19067
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
MBI GLUCK SHAW GOVERNMENT RELATIONS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0
Transaction ID: SA11.13977593
Amount of Each Receipt this Period 250.00
JFC ATTRIBUTION: KEYSTONE VICTORY FUND
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
RONALD MUHLENKAMP
Mailing Address 725 THREE DEGREE RD.
City State Zip Code
BUTLER PA 16002
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
MUHLENKAMP & CO. PRE0
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0
Transaction ID: SA11.13977698
Amount of Each Receipt this Period 5000.00
JFC ATTRIBUTION: KEYSTONE VICTORY FUND
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► 0.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2668 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) JOHN JOSEPH MULLEN		Date of Receipt
	Mailing Address		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	City State Zip Code 99999		Transaction ID: SA11.13977697
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		JFC ATTRIBUTION: KEYSTONE VICTORY FUND
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation INFORMATION REQUESTED PER BEST EFFORTS	[MEMO ITEM]
		Aggregate Year-to-Date ▼ 5000.00	

B.	Full Name (Last, First, Middle Initial) THOMAS NOWAKOWSKI		Date of Receipt
	Mailing Address 7 CHESTNUT LANE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	City State Zip Code NEW HOPE PA 18938		Transaction ID: SA11.13977683
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
	Name of Employer UNITED MARKETING SERVICES		JFC ATTRIBUTION: KEYSTONE VICTORY FUND
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation EXECUTIVE	[MEMO ITEM]
		Aggregate Year-to-Date ▼ 2500.00	

C.	Full Name (Last, First, Middle Initial) JOHN RUNKEL		Date of Receipt
	Mailing Address 1 HIGHVIEW DR.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	City State Zip Code SEWICKLEY PA 15143		Transaction ID: SA11.13977579
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
	Name of Employer HJ HEINZ COMPANY		JFC ATTRIBUTION: KEYSTONE VICTORY FUND
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation VICE PRESIDENT	[MEMO ITEM]
		Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2669 / 3187

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
JUDITH RUNKEL

Mailing Address 1 HIGHVIEW DR.

City State Zip Code
SEWICKLEY PA 15143

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13977580

Amount of Each Receipt this Period

2500.00

JFC ATTRIBUTION: KEYSTONE VICTORY FUND

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
CHARLES E RYAN

Mailing Address 50 PARK ROW W.
STE. 113

City State Zip Code
PROVIDENCE RI 02903

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REX CAPITAL ADVISORS INVESTOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13977691

Amount of Each Receipt this Period

2500.00

JFC ATTRIBUTION: KEYSTONE VICTORY FUND

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
WILLIAM S. SHIPLEY

Mailing Address 1335 HILLTOP PLACE

City State Zip Code
YORK PA 17403

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
THE SHIPLEY GROUP OWNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13977568

Amount of Each Receipt this Period

750.00

JFC ATTRIBUTION: KEYSTONE VICTORY FUND

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2670 / 3187
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DAVID J. URBAN

Mailing Address 10100 MEYER POINT TER.

City State Zip Code
POTOMAC MD 20854

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ACG CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13977597

Amount of Each Receipt this Period
500.00

JFC ATTRIBUTION: KEYSTONE VICTORY FUND

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
DANIEL J. VERES

Mailing Address 10210 GRUBBS RD.

City State Zip Code
WEXFORD PA 15090

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GRANT STREET GROUP VICE PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13977681

Amount of Each Receipt this Period
2500.00

JFC ATTRIBUTION: KEYSTONE VICTORY FUND

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
DAVID WILCOX

Mailing Address 3900 S. MALLARD LANE

City State Zip Code
DOYLESTOWN PA 18902

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
COLEGATE PALMOLIVE RESEARCHER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13977572

Amount of Each Receipt this Period
1250.00

JFC ATTRIBUTION: KEYSTONE VICTORY FUND

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2671 / 3187

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
COZEN O'CONNOR PAC

Mailing Address 1900 MARKET ST.
3RD FL

City State Zip Code
PHILADELPHIA PA 19103

FEC ID number of contributing federal political committee. **C** C00312777

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13977596

Amount of Each Receipt this Period

500.00

JFC ATTRIBUTION: KEYSTONE VICTORY FUND

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
EXPRESSSCRIPTS INC. PAC

Mailing Address ONE EXPRESS WAY

City State Zip Code
SAINT LOUIS MO 63121

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13977688

Amount of Each Receipt this Period

2500.00

JFC ATTRIBUTION: KEYSTONE VICTORY FUND

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
FIRSTENERGY PAC

Mailing Address 76 S. MAIN ST.
SUITE 310

City State Zip Code
AKRON OH 44308

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11.13977578

Amount of Each Receipt this Period

2500.00

JFC ATTRIBUTION: KEYSTONE VICTORY FUND

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2672 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) FRIENDS OF GARTH EVERETT	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	Mailing Address	Transaction ID: SA11.13977570
	City State Zip Code 99999	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: KEYSTONE VICTORY FUND
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00 [MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) FRIENDS OF GLENN THOMPSON	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	Mailing Address P.O. BOX 1066	Transaction ID: SA11.13977693
	City State Zip Code LEWISTOWN PA 17044-1066	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C C00444620	JFC ATTRIBUTION: KEYSTONE VICTORY FUND
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7500.00 [MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) FRIENDS OF JEB HENSARLING	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	Mailing Address P.O. BOX 820504	Transaction ID: SA11.13977696
	City State Zip Code DALLAS TX 75382-0504	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C C00370650	JFC ATTRIBUTION: KEYSTONE VICTORY FUND
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00 [MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2673 / 3187
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
HDR INC. PAC

Mailing Address 8404 INDIAN HILLS DR.

City State Zip Code
OMAHA NE 68114

FEC ID number of contributing federal political committee. **C** C00103903

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13977562
Amount of Each Receipt this Period: 500.00
JFC ATTRIBUTION: KEYSTONE VICTORY FUND
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
HIGHMARK HEALTH PAC

Mailing Address 1800 CENTER ST

City State Zip Code
CAMP HILL PA 17089

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13977595
Amount of Each Receipt this Period: 500.00
JFC ATTRIBUTION: KEYSTONE VICTORY FUND
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
JIM GERLACH FOR CONGRESS

Mailing Address P.O. BOX 87

City State Zip Code
UWCHLAND PA 19480-0087

FEC ID number of contributing federal political committee. **C** C00372102

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 67500.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13977660
Amount of Each Receipt this Period: 42500.00
JFC ATTRIBUTION: KEYSTONE VICTORY FUND
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶ 0.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2674 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
KEYSTONE ALLIANCE PAC
Mailing Address P.O. BOX 3883
City PHILADELPHIA State PA Zip Code 19146-0183
FEC ID number of contributing federal political committee. **C** C00432096
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00
Date of Receipt 10 / 25 / 2010
Transaction ID: SA11.13977684
Amount of Each Receipt this Period 2500.00
JFC ATTRIBUTION: KEYSTONE VICTORY FUND
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
SAUL EWING LLP
Mailing Address 1500 MARKET ST.
38TH FL. 38TH FLOOR
City PHILADELPHIA State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 8500.00
Date of Receipt 10 / 25 / 2010
Transaction ID: SA11.13977699
Amount of Each Receipt this Period 7500.00
JFC ATTRIBUTION: KEYSTONE VICTORY FUND
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
SOCIETY OF IND. GASOLINE MKTS PAC
Mailing Address 3930 PENDER DR.,
STE. 340
City FAIRFAX State VA Zip Code 22030
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00
Date of Receipt 10 / 25 / 2010
Transaction ID: SA11.13977569
Amount of Each Receipt this Period 750.00
JFC ATTRIBUTION: KEYSTONE VICTORY FUND
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶ 0.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2675 / 3187
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
SPECTRA ENERGY CORP PAC

Mailing Address 5400 WESTHEIMER CT.

City HOUSTON State TX Zip Code 77056

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13977577
Amount of Each Receipt this Period: 2500.00
JFC ATTRIBUTION: KEYSTONE VICTORY FUND
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
STRADLEY, RONON STEVENS & YOUNG, LLP

Mailing Address 2005 MARKET ST.
STE. 2600

City PHILADELPHIA State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13977574
Amount of Each Receipt this Period: 1250.00
JFC ATTRIBUTION: KEYSTONE VICTORY FUND
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
TUESDAY GROUP PAC

Mailing Address P.O. BOX 11586

City WASHINGTON State DC Zip Code 20008-0786

FEC ID number of contributing federal political committee. **C** C00433060

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11.13977689
Amount of Each Receipt this Period: 2500.00
JFC ATTRIBUTION: KEYSTONE VICTORY FUND
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► 0.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2676 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
KEYSTONE MAJORITY FUND

Mailing Address 288 S. WASHINGTON ST.
STE. 115

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200000.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 01 / 2010

Transaction ID: SA12.KMF002

Amount of Each Receipt this Period
25000.00

TRANSFER OF JOINT FUNDRAISING PROCEEDS

B. Full Name (Last, First, Middle Initial)
BLAISE ALEXANDER

Mailing Address 10 ALEXANDER DR.

City State Zip Code
MUNCY PA 17756

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 01 / 2010

Transaction ID: SA11.13977616

Amount of Each Receipt this Period
2500.00

JFC ATTRIBUTION: KEYSTONE VICTORY FUND
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MS. EVELYN GRAHAM

Mailing Address 61 COXE ST.

City State Zip Code
HAZLETON PA 18201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AD EASE, INC. PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 01 / 2010

Transaction ID: SA11.13977613

Amount of Each Receipt this Period
2500.00

JFC ATTRIBUTION: KEYSTONE VICTORY FUND
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► **25000.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2677 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) WILLIAM RINALDI		Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address 4000 4TH ST., STE. 3		Transaction ID: SA11.13977617
	City MOOSIC	State PA	Zip Code 18507
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10000.00
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	JFC ATTRIBUTION: KEYSTONE VICTORY FUND
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 10000.00	[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) MARVIN SLOWOWITZ		Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address 313 SYLBERT DR.		Transaction ID: SA11.13977618
	City KINGSTON	State PA	Zip Code 18704
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10000.00
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	JFC ATTRIBUTION: KEYSTONE VICTORY FUND
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 10000.00	[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) COZEN O'CONNOR PAC		Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address 1900 MARKET ST. 3RD FL		Transaction ID: SA11.13977614
	City PHILADELPHIA	State PA	Zip Code 19103
	FEC ID number of contributing federal political committee. C C00312777		Amount of Each Receipt this Period 500.00
	Name of Employer	Occupation	JFC ATTRIBUTION: KEYSTONE VICTORY FUND
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2678 / 3187

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
SAUL EWING LLP

Mailing Address 1500 MARKET ST.
38TH FL. 38TH FLOOR

City State Zip Code
PHILADELPHIA PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
8500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11.13977615

Amount of Each Receipt this Period

1000.00

JFC ATTRIBUTION: KEYSTONE VICTORY FUND

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
MAJORITY TRUST

Mailing Address 228 S WASHINGTON STREET
SUITE 115

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1650.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.MT001

Amount of Each Receipt this Period

1650.00

TRANSFER OF JOINT FUNDRAISING PROCEEDS

C.

Full Name (Last, First, Middle Initial)
MR. THOMAS E. JECKERING

Mailing Address 7720 MAYFIELD ROAD

City State Zip Code
GATES MILLS OH 44040-8601

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4166.67

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA12.13958205

Amount of Each Receipt this Period

1666.67

JFC ATTRIBUTION: MAJORITY TRUST 2010

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶

1650.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2679 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ROLLS ROYCE NORTH AMERICA PAC		Date of Receipt
	Mailing Address 1875 EXPLORER STREET SUITE 200		<input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	RESTON	VA	20190-6022
	FEC ID number of contributing federal political committee.		Transaction ID: SA12.13958204
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="5000.00"/>
			JFC ATTRIBUTION: MAJORITY TRUST 2010
			[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) MARY BONO MACK VICTORY FUND		Date of Receipt
	Mailing Address 228 S WASHINGTON ST STE 115		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	ALEXANDRIA	VA	22314
	FEC ID number of contributing federal political committee.		Transaction ID: SA12.MBMVF01
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="28700.00"/>
			TRANSFER OF JOINT FUNDRAISING PROCEEDS

C.	Full Name (Last, First, Middle Initial) THOMAS BOMBADIER		Date of Receipt
	Mailing Address 195 HANOVER STREET		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	HANOVER	MA	02339
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.13977608
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="14350.00"/>
			JFC ATTRIBUTION: MARY BONO MACK VICTORY
			[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="28700.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2680 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) JOHN FOWLER	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 8 / 2 0 1 0
	Mailing Address 195 HANOVER STREET	Transaction ID: SA11.13977609
	City State Zip Code HANOVER MA 02339	Amount of Each Receipt this Period 14350.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: MARY BONO MACK VICTORY
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 14350.00	

B.	Full Name (Last, First, Middle Initial) NEW ENGLAND MAJORITY FUND	Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 0 / 2 0 1 0
	Mailing Address PO BOX 365	Transaction ID: SA12NEMF01
	City State Zip Code MCLEAN VA 22101	Amount of Each Receipt this Period 11100.00
	FEC ID number of contributing federal political committee. C	TRANSFER OF JOINT FUNDRAISING PROCEEDS
Name of Employer	Occupation	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 11100.00	

C.	Full Name (Last, First, Middle Initial) GEOFFREY REHNERT	Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 0 / 2 0 1 0
	Mailing Address 101 HUNTINGTON AVE.	Transaction ID: SA11.13977555
	City State Zip Code BOSTON MA 02199	Amount of Each Receipt this Period 5500.00
	FEC ID number of contributing federal political committee. C	JFC ATTRIBUTION: NEW ENGL- AND MAJORITY FU
Name of Employer AUDAX	Occupation CEO	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5500.00	

SUBTOTAL of Receipts This Page (optional)	▶	11100.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2681 / 3187

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DAVID C. WEINSTEIN		Date of Receipt MM / DD / YYYY 11 / 10 / 2010		
	Mailing Address 60 STATE ST. SUITE 700		Transaction ID: SA11.13977553		
	City BOSTON	State MA	Zip Code 02109	Amount of Each Receipt this Period 3333.33	
	FEC ID number of contributing federal political committee. C		JFC ATTRIBUTION: NEW ENGL- AND MAJORITY FU		
	Name of Employer SELF-EMPLOYED		Occupation ATTORNEY		[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3333.33			

B.	Full Name (Last, First, Middle Initial) DAVID WEINSTEIN		Date of Receipt MM / DD / YYYY 11 / 10 / 2010		
	Mailing Address 158 COTTON ST.		Transaction ID: SA11.13977554		
	City NEWTON	State MA	Zip Code 02158	Amount of Each Receipt this Period 5500.00	
	FEC ID number of contributing federal political committee. C		JFC ATTRIBUTION: NEW ENGL- AND MAJORITY FU		
	Name of Employer SELF-EMPLOYED		Occupation ATTORNEY		[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5500.00			

C.	Full Name (Last, First, Middle Initial) SCHOCK VICTORY COMMITTEE		Date of Receipt MM / DD / YYYY 11 / 16 / 2010		
	Mailing Address 264 N. LUMPKIN ST., #202		Transaction ID: SA12.SVC001		
	City ATHENS	State GA	Zip Code 30601	Amount of Each Receipt this Period 602.36	
	FEC ID number of contributing federal political committee. C		TRANSFER OF JOINT FUNDRAI- SING PROCEEDS		
	Name of Employer		Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 99457.32			

SUBTOTAL of Receipts This Page (optional) ▶

602.36

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2682 / 3187

(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DOUGLAS OBERHELMAN

Mailing Address 6000 NORTH KICKAPOO EDWARDS ROAD

City State Zip Code
EDWARDS IL 61528-9473

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CATERPILLAR, INC. GROUP PRESIDENT

Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11.13977588

Amount of Each Receipt this Period

1000.00

JFC ATTRIBUTION: SCHOCK VICTORY COMMITTEE

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
MR. STEPHEN HILBERT

Mailing Address 6270 CORPORATE DRIVE

City State Zip Code
INDIANAPOLIS IN 46278-2900

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NEW SUNSHINE, LLC PARTNER

Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA12.13958215

Amount of Each Receipt this Period

15000.00

JFC ATTRIBUTION: 2010 INDIANA REPUBLICAN

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

2051082.60

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2683 / 3187

(check only one)

<input type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
<input checked="" type="checkbox"/>									X								

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

WACHOVIA

Mailing Address 1753 PINNACLE DRIVE

City	State	Zip Code
MCLEAN	VA	22102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:

Primary General

Other (specify) ▼

Aggregate Year-to-Date ▼
12000000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	4	/	2	0	1	0

Transaction ID: SA13.LOC01

Amount of Each Receipt this Period
12000000.00

DRAW ON LINE OF CREDIT

SUBTOTAL of Receipts This Page (optional)

12000000.00

TOTAL This Period (last page this line number only)

12000000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2684 / 3187

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

ANDY BARR FOR CONGRESS, INC.

Mailing Address PO BOX 2059

City State Zip Code
LEXINGTON KY 40588

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
916.41

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA15-0.000628

Amount of Each Receipt this Period

916.41

REFUND - TRAVEL

B.

Full Name (Last, First, Middle Initial)

ANN MARIE BUERKLE FOR CONGRESS

Mailing Address 3779 UNDERWOOD WAY

City State Zip Code
SYRACUSE NY 13215

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
633.80

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA15-0.000634

Amount of Each Receipt this Period

633.80

REFUND - TRAVEL

C.

Full Name (Last, First, Middle Initial)

BUCHSHON FOR CONGRESS

Mailing Address PO BOX 250

City State Zip Code
NEWBURGH IN 47629

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
916.41

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA15-0.000627

Amount of Each Receipt this Period

916.41

REFUND - TRAVEL

SUBTOTAL of Receipts This Page (optional)

2466.62

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2685 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
CHARLIE DENT FOR CONGRESS

Mailing Address PO BOX 442

City ALLENTOWN State PA Zip Code 18105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 631.77

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA15-0.000631
Amount of Each Receipt this Period: 631.77
REFUND - TRAVEL

B. Full Name (Last, First, Middle Initial)
CHRIS LEE FOR CONGRESS

Mailing Address P.O. BOX 15395

City ROCHESTER State NY Zip Code 14615

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1217.61

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA15-0.000636
Amount of Each Receipt this Period: 580.88
REFUND - TRAVEL

C. Full Name (Last, First, Middle Initial)
FRIENDS OF TODD YOUNG

Mailing Address PO BOX 1053

City BLOOMINGTON State IN Zip Code 47402

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 916.41

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA15-0.000626
Amount of Each Receipt this Period: 916.41
REFUND - TRAVEL

SUBTOTAL of Receipts This Page (optional) ► **2129.06**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2686 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial) HAROLD JOHNSON FOR CONGRESS		Date of Receipt MM / DD / YYYY 10 / 20 / 2010
Mailing Address 349-L COPPERFIELD BLVD SUITE 233		Transaction ID: SA15-0.000635
City CONCORD	State NC	Zip Code 28025
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 779.26
Name of Employer	Occupation	REFUND - TRAVEL
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 779.26	

B.

Full Name (Last, First, Middle Initial) HOOSIERS FOR ROKITA		Date of Receipt MM / DD / YYYY 10 / 20 / 2010
Mailing Address 7643 EAST U.S. 36		Transaction ID: SA15-0.000625
City AVON	State IN	Zip Code 46123
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 916.41
Name of Employer	Occupation	REFUND - TRAVEL
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 916.41	

C.

Full Name (Last, First, Middle Initial) JIM GERLACH FOR CONGRESS COMMITTEE		Date of Receipt MM / DD / YYYY 10 / 20 / 2010
Mailing Address PO BOX 87		Transaction ID: SA15-0.000630
City UWCHLAND	State PA	Zip Code 19480
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 401.11
Name of Employer	Occupation	REFUND - TRAVEL
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.11	

SUBTOTAL of Receipts This Page (optional)	2096.78
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2687 / 3187

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
LALLY FOR CONGRESS

Mailing Address 2017 BOULEVARD NAPOLEON

City State Zip Code
LOUISVILLE KY 40205

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
916.41

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA15-0.000620

Amount of Each Receipt this Period

916.41

REFUND - TRAVEL

B.

Full Name (Last, First, Middle Initial)
LOU BARLETTA FOR CONGRESS

Mailing Address PO BOX 128

City State Zip Code
HAZLETON PA 18201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
336.50

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA15-0.000640

Amount of Each Receipt this Period

336.50

REFUND - TRAVEL

C.

Full Name (Last, First, Middle Initial)
MIKE KELLY FOR CONGRESS

Mailing Address PO BOX 476

City State Zip Code
LYNDORA PA 16045

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
923.30

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA15-0.000633

Amount of Each Receipt this Period

923.30

REFUND - TRAVEL

SUBTOTAL of Receipts This Page (optional)

2176.21

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2688 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
TIM WALBERG FOR CONGRESS
Mailing Address 317 W. WASHINGTON AVE
City JACKSON State MI Zip Code 49201
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1501.75
Date of Receipt 10 / 20 / 2010
Transaction ID: SA15-0.000629
Amount of Each Receipt this Period 410.37
REFUND - TRAVEL

B. Full Name (Last, First, Middle Initial)
TOM REED FOR CONGRESS
Mailing Address 99 W 1ST ST
City CORNING State NY Zip Code 14830
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 580.88
Date of Receipt 10 / 20 / 2010
Transaction ID: SA15-0.000624
Amount of Each Receipt this Period 580.88
REFUND - TRAVEL

C. Full Name (Last, First, Middle Initial)
WALORSKI FOR CONGRESS INC
Mailing Address PO BOX 954
City MISHAWAKA State IN Zip Code 46546
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 254.51
Date of Receipt 10 / 20 / 2010
Transaction ID: SA15-0.000632
Amount of Each Receipt this Period 254.51
REFUND - TRAVEL

SUBTOTAL of Receipts This Page (optional) ► 1245.76
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2689 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
AUTOMATIC DATA PROCESSING
Mailing Address PO BOX 9001006
City LOUISVILLE State KY Zip Code 40290-1006
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 11079.03
Date of Receipt 10 / 20 / 2010
Transaction ID: SA15-0.000637
Amount of Each Receipt this Period 453.23
REFUND - INSURANCE

B. Full Name (Last, First, Middle Initial)
COMMUNICATIONS CORP OF AMERICA
Mailing Address 13195 FREEDOM WAY
City BOSTON State VA Zip Code 22713
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 21239.51
Date of Receipt 10 / 20 / 2010
Transaction ID: SA15-0.000618
Amount of Each Receipt this Period 8485.29
REFUND - PRINTING

C. Full Name (Last, First, Middle Initial)
CRAFT MEDIA DIGITAL
Mailing Address 706 7TH ST SE
City WASHINGTON State DC Zip Code 20003
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 11500.00
Date of Receipt 10 / 27 / 2010
Transaction ID: SA15-0.000641
Amount of Each Receipt this Period 11500.00
REFUND - MEDIA

SUBTOTAL of Receipts This Page (optional) ► 20438.52
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2690 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DC TREASURER

Mailing Address PO BOX 37630

City WASHINGTON State DC Zip Code 20013

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 19302.93

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA15-0.000622
Amount of Each Receipt this Period: 2640.00
REFUND - TAXES

B. Full Name (Last, First, Middle Initial)
WILKINS ENTERPRISE

Mailing Address 11201 GLISSADE DR

City CLINTON State MD Zip Code 20735

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4215.35

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA15-0.000619
Amount of Each Receipt this Period: 4215.35
REFUND - MAINTENANCE

C. Full Name (Last, First, Middle Initial)
SCOTTPAC

Mailing Address 15 LAUREL TERRACE

City SPARTA State NJ Zip Code 07871

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3454.97

Date of Receipt: 10 / 20 / 2010
Transaction ID: SA15-0.000623
Amount of Each Receipt this Period: 3454.97
REFUND - TRAVEL

SUBTOTAL of Receipts This Page (optional)

10310.32

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2691 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
THE FREEDOM PROJECT

Mailing Address 631-B PENNSYLVANIA AVE

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9509.12

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA15-0.000621

Amount of Each Receipt this Period
567.06

REFUND - TRAVEL

SUBTOTAL of Receipts This Page (optional)	▶	567.06
TOTAL This Period (last page this line number only)	▶	41430.33

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2692 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
CONGRESSMAN JOE BARTON COMMITTEE
Mailing Address P.O. BOX 1444

City State Zip Code
ENNIS TX 75120-1444

FEC ID number of contributing federal political committee. **C** C00195065

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	9	/	2	0	1	0

Transaction ID: SA15.13967224
 Amount of Each Receipt this Period
 5000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ANDREW F. BARTH
Mailing Address 2200 CHAUCER ROAD

City State Zip Code
SAN MARINO CA 91108-1314

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CAPITAL GROUP COMPANIES INVESTMENT MANAGEMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
30400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA15.13957961
 Amount of Each Receipt this Period
 30400.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. SUMIR CHADHA
Mailing Address 1440 OAK RIM DRIVE

City State Zip Code
HILLSBOROUGH CA 94010-7356

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GRANITE CAPITAL EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
30400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	1	0

Transaction ID: SA15.13959341
 Amount of Each Receipt this Period
 30400.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **65800.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2693 / 3187
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GEORGE H. CONRADES

Mailing Address 344 BEACON STREET

City State Zip Code
BOSTON MA 02116-1002

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt: 11 / 15 / 2010
Transaction ID: SA15.13969125
Amount of Each Receipt this Period: 2400.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. BARBARA GABY

Mailing Address 445 OLD HOMESTEAD TRAIL

City State Zip Code
JOHNS CREEK GA 30097-8027

FEC ID number of contributing federal political committee. **C**

Name of Employer GABY FOUNDATION Occupation TRUSTEE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt: 10 / 28 / 2010
Transaction ID: SA15.13961203
Amount of Each Receipt this Period: 30400.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RICHARD GABY

Mailing Address 445 OLD HOMESTEAD TRAIL

City State Zip Code
JOHNS CREEK GA 30097-8027

FEC ID number of contributing federal political committee. **C**

Name of Employer GABY FOUNDATION Occupation TRUSTEE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt: 10 / 28 / 2010
Transaction ID: SA15.13961200
Amount of Each Receipt this Period: 30400.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 63200.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2694 / 3187
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR. ROBERT S. KRAMER	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	Mailing Address 1233 N GULFSTREAM AVENUE APARTMENT 1403	Transaction ID: SA15.13957962
	City State Zip Code SARASOTA FL 34236-8923	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SARO MANAGEMENT INCORPORATED OWNER/RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) MR. ANDRE B. LACY	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 1 0
	Mailing Address 54 MONUMENT CIRCLE STE. 800	Transaction ID: SA15.13967226
	City State Zip Code INDIANAPOLIS IN 46204	Amount of Each Receipt this Period 2200.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation LDI, LTD. EXECUTIVE	[MEMO ITEM] REDESIGNATION FROM FEDERAL FUN
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2200.00	

C.	Full Name (Last, First, Middle Initial) MR. ROBERT C. MCNAIR, SR.	Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 1 0
	Mailing Address TWO RELIANT PARK RELIANT STADIUM	Transaction ID: SA15.13967208
	City State Zip Code HOUSTON TX 77054-1573	Amount of Each Receipt this Period 10000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation THE HOUSTON TEXANS CHAIRMAN & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

SUBTOTAL of Receipts This Page (optional)	▶	10500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2695 / 3187
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS. FRANCES B. NELSON

Mailing Address 60 31ST AVENUE

City State Zip Code
SAN MATEO CA 94403-3404

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BOHANNAR DEVELOPMENT COMP- ANY EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA15.13942460

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROD SCHNEIDMILLER

Mailing Address 6716 S SADDLE RIDGE ROAD

City State Zip Code
GREENACRES WA 99016-7716

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
STERLING INTERNATIONAL, INC. OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA15.13942941

Amount of Each Receipt this Period
10000.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM FEDERAL FUN

C. Full Name (Last, First, Middle Initial)
MR. CHARLES R. SCHWAB

Mailing Address PO BOX 192861

City State Zip Code
SAN FRANCISCO CA 94119-2861

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CHARLES SCHWAB & COMPANY INC. CHAIRMAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 25000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA15.13957960

Amount of Each Receipt this Period
25000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **30000.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2696 / 3187
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES E. STEPHENSON

Mailing Address P.O. BOX 43326

City ATLANTA State GA Zip Code 30336-0326

FEC ID number of contributing federal political committee. **C**

Name of Employer YANCEY BROS. COMPANY Occupation PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 10 / 15 / 2010

Transaction ID: SA15.13932331

Amount of Each Receipt this Period 15000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SYCUAN BAND OF THE KUMEYAAY NATION

Mailing Address 5459 SYCUAN ROAD

City EL CAJON State CA Zip Code 92019-1821

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 20000.00

Date of Receipt 10 / 28 / 2010

Transaction ID: SA15.13961201

Amount of Each Receipt this Period 20000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BORDER HEALTH FEDERAL PAC

Mailing Address 612 W NOLANA STREET SUITE 340

City MCALLEN State TX Zip Code 78504-3088

FEC ID number of contributing federal political committee. **C** C00415752

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 10 / 18 / 2010

Transaction ID: SA15.13942461

Amount of Each Receipt this Period 15000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 50000.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2697 / 3187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
COMMON SENCE COMMON SOLUTIONS PAC

Mailing Address 1155 21ST STREET NW
SUITE 300

City WASHINGTON State DC Zip Code 20036-3312

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 11 / 01 / 2010
Transaction ID: SA15.13965488
 Amount of Each Receipt this Period 15000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CONCERNED AMERICANS FOR FREEDOM & OPPORTUNITY PAC

Mailing Address 228 SOUTH WASHINGTON STREET
SUITE 115

City ALEXANDRIA State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C** C00481176

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 11 / 09 / 2010
Transaction ID: SA15.13967223
 Amount of Each Receipt this Period 3000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
INDEPENDENT INSURANCE AGENTS AND BROKERS OF AMERICA

Mailing Address 412 1ST STREET SE
SUITE 300

City WASHINGTON State DC Zip Code 20003-1804

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 11 / 18 / 2010
Transaction ID: SA15.13972724
 Amount of Each Receipt this Period 15000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 33000.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2698 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) KOCH INDUSTRIES PAC</p> <p>Mailing Address 655 15TH STREET N.W. SUITE 445</p> <p>City State Zip Code WASHINGTON DC 20005-5727</p> <p>FEC ID number of contributing federal political committee. C C00236489</p> <p>Name of Employer Occupation</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 15000.00</p>	<p>Date of Receipt MM / DD / YYYY 11 / 16 / 2010</p> <p>Transaction ID: SA15.13970896</p> <p>Amount of Each Receipt this Period 15000.00</p> <p>CONTRIBUTION</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) MANAGED FUNDS ASSOCIATION PAC</p> <p>Mailing Address 2025 M. STREET NW SUITE 610</p> <p>City State Zip Code WASHINGTON DC 20036-2422</p> <p>FEC ID number of contributing federal political committee. C C00306894</p> <p>Name of Employer Occupation</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 7600.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 28 / 2010</p> <p>Transaction ID: SA15.13961199</p> <p>Amount of Each Receipt this Period 7600.00</p> <p>CONTRIBUTION</p>
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<p>C. Full Name (Last, First, Middle Initial) NATIONAL BEER WHOLESALERS ASSOCIATION, PAC</p> <p>Mailing Address 1101 KING STREET SUITE 600</p> <p>City State Zip Code ALEXANDRIA VA 22314-2965</p> <p>FEC ID number of contributing federal political committee. C C00144766</p> <p>Name of Employer Occupation</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 15000.00</p>	<p>Date of Receipt MM / DD / YYYY 11 / 15 / 2010</p> <p>Transaction ID: SA15.13969124</p> <p>Amount of Each Receipt this Period 15000.00</p> <p>CONTRIBUTION</p>
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SUBTOTAL of Receipts This Page (optional)	37600.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2699 / 3187
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
NEW PIONEERS PAC

Mailing Address 228 SO. WASHINGTON STREET
SUITE 115

City State Zip Code
ALEXANDRIA VA 22314-5404

FEC ID number of contributing federal political committee. **C** C00459123

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
30400.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: SA15.13957958

Amount of Each Receipt this Period
30400.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
PFIZER, PAC

Mailing Address 325 7TH STREET, NW STE. 1200

City State Zip Code
WASHINGTON DC 20004-2820

FEC ID number of contributing federal political committee. **C** C00016683

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
11 / 09 / 2010

Transaction ID: SA15.13967210

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
TEXAS FREEDOM FUND

Mailing Address 104 E. HUME AVENUE

City State Zip Code
ALEXANDRIA VA 22301-1015

FEC ID number of contributing federal political committee. **C** C00340661

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
11 / 09 / 2010

Transaction ID: SA15.13967222

Amount of Each Receipt this Period
15000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **50400.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2700 / 3187
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) WEDGE PAC		Date of Receipt
	Mailing Address P.O. BOX 680063		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	FRANKLIN	TN	37068-0063
	FEC ID number of contributing federal political committee.	<input type="text" value="C00409276"/>	Transaction ID: SA15.13957959
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="15000.00"/>
		<input type="text" value="15000.00"/>	CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) WELLPOINT INC., WELL PAC		Date of Receipt
	Mailing Address 655 15TH STREET, NW SUITE 425		<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	WASHINGTON	DC	20005-5724
	FEC ID number of contributing federal political committee.	<input type="text" value="C00197228"/>	Transaction ID: SA15.13967209
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="5000.00"/>
		<input type="text" value="5000.00"/>	CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="20000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="360500.00"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 2701 / 3187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) MRS. KATHERINE H. ALDEN <hr/> Mailing Address 440 MANZANITA WAY <hr/> City WOODSIDE State CA Zip Code 94062-1215 <hr/> Purpose of Disbursement IN-KIND: FOOD AND BEVERAGE Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SA11A.13977523A Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 1 0
	Amount of Each Disbursement this Period 2000.00
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) WHITAKER L ASKEW <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement TRAVEL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016700 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 1 0
	Amount of Each Disbursement this Period 15321.16
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) WHITAKER L ASKEW <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016702 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0
	Amount of Each Disbursement this Period 411.23
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	17732.39
TOTAL This Period (last page this line number only) ▶	(Empty)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 2702 / 3187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) WHITAKER L ASKEW <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016974 Date of Disbursement 11 / 05 / 2010
	Amount of Each Disbursement this Period 415.71
	Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) WHITAKER L ASKEW <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017187 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 102.81
	Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) JACKIE M BARBER <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016703 Date of Disbursement 10 / 22 / 2010
	Amount of Each Disbursement this Period 1752.14
	Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

2270.66

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) JACKIE M BARBER <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016975 Date of Disbursement 11 / 05 / 2010
	Amount of Each Disbursement this Period 1756.62
	Category/Type
	Category/Type
B. Full Name (Last, First, Middle Initial) JACKIE M BARBER <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017188 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 438.04
	Category/Type
	Category/Type
C. Full Name (Last, First, Middle Initial) JONATHAN BLACK <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement TRAVEL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016881 Date of Disbursement 11 / 04 / 2010
	Amount of Each Disbursement this Period 243.62
	Category/Type
	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

2438.28

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) JONATHAN R BLACK</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016704</p> <p>Date of Disbursement 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 2896.56</p>
<p>B. Full Name (Last, First, Middle Initial) JONATHAN R BLACK</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016976</p> <p>Date of Disbursement 11 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 2908.90</p>
<p>C. Full Name (Last, First, Middle Initial) JONATHAN R BLACK</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.017189</p> <p>Date of Disbursement 11 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 724.14</p>

SUBTOTAL of Disbursements This Page (optional) ▶

6529.60

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) GREGORY A BLAIR	Transaction ID: SB21-0.016705 Date of Disbursement 10 / 22 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 1397.62
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) GREGORY A BLAIR	Transaction ID: SB21-0.016977 Date of Disbursement 11 / 05 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 1402.10
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) GREGORY A BLAIR	Transaction ID: SB21-0.017190 Date of Disbursement 11 / 19 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 349.41
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3149.13
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) MICHAEL F BOBER <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016713 Date of Disbursement 10 / 22 / 2010
	Amount of Each Disbursement this Period 2460.19
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) MICHAEL F BOBER <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016978 Date of Disbursement 11 / 05 / 2010
	Amount of Each Disbursement this Period 2472.53
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) MICHAEL F BOBER <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017191 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 615.05
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

5547.77

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) LISA BOOTHE	Transaction ID: SB21-0.016714 Date of Disbursement
	Mailing Address 320 1ST ST SE	<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL	<input type="text" value="887.08"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) LISA BOOTHE	Transaction ID: SB21-0.016979 Date of Disbursement
	Mailing Address 320 1ST ST SE	<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2010"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL	<input type="text" value="891.55"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) LISA BOOTHE	Transaction ID: SB21-0.017192 Date of Disbursement
	Mailing Address 320 1ST ST SE	<input type="text" value="11"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL	<input type="text" value="221.77"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2000.40"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MATTHEW BORGES</p> <p>Mailing Address 95 DAY CT</p> <p>City WESTERVILLE State OH Zip Code 43018</p> <p>Purpose of Disbursement POLITICAL STRATEGY CONSULTING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016625</p> <p>Date of Disbursement 10 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>B. Full Name (Last, First, Middle Initial) JUSTIN BRASELL</p> <p>Mailing Address 1345 W. WICKLOW CT</p> <p>City SIOUX FALLS State SD Zip Code 57108</p> <p>Purpose of Disbursement POLITICAL STRATEGY CONSULTING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016857</p> <p>Date of Disbursement 11 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 8000.00</p>
<p>C. Full Name (Last, First, Middle Initial) NATALIE BUCHANAN</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016707</p> <p>Date of Disbursement 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 1250.93</p>

SUBTOTAL of Disbursements This Page (optional) ▶

14250.93

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
NATALIE BUCHANAN

Transaction ID: SB21-0.016961
Date of Disbursement

Mailing Address 320 1ST ST SE

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	0		2	0	1	0

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

Purpose of Disbursement
TRAVEL

214.52

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
NATALIE BUCHANAN

Transaction ID: SB21-0.016980
Date of Disbursement

Mailing Address 320 1ST ST SE

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	5		2	0	1	0

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

Purpose of Disbursement
PAYROLL

1255.41

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
NATALIE BUCHANAN

Transaction ID: SB21-0.017193
Date of Disbursement

Mailing Address 320 1ST ST SE

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	9		2	0	1	0

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

Purpose of Disbursement
PAYROLL

312.74

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

1782.67

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
JOANNA BURGOS

Transaction ID: SB21-0.016708
Date of Disbursement

Mailing Address 320 1ST ST SE

10 / 22 / 2010

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

Purpose of Disbursement
PAYROLL

Category/Type

1830.59

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
JOANNA BURGOS

Transaction ID: SB21-0.016981
Date of Disbursement

Mailing Address 320 1ST ST SE

11 / 05 / 2010

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

Purpose of Disbursement
PAYROLL

Category/Type

1842.93

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
JOANNA BURGOS

Transaction ID: SB21-0.017194
Date of Disbursement

Mailing Address 320 1ST ST SE

11 / 19 / 2010

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

Purpose of Disbursement
PAYROLL

Category/Type

457.65

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

4131.17

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) LAURA CAMP</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016962</p> <p>Date of Disbursement 11 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 83.33</p>
<p>B. Full Name (Last, First, Middle Initial) LAURA M CAMP</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016709</p> <p>Date of Disbursement 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 1324.04</p>
<p>C. Full Name (Last, First, Middle Initial) LAURA M CAMP</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016982</p> <p>Date of Disbursement 11 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 1328.51</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2735.88

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) LAURA M CAMP</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.017195</p> <p>Date of Disbursement 11 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 331.01</p>
<p>B. Full Name (Last, First, Middle Initial) ERIM V CANLIGIL</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016710</p> <p>Date of Disbursement 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 1178.87</p>
<p>C. Full Name (Last, First, Middle Initial) ERIM V CANLIGIL</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016983</p> <p>Date of Disbursement 11 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 1183.33</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2693.21

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) ERIM V CANLIGIL</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.017196</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="294.72"/></p>
<p>B. Full Name (Last, First, Middle Initial) RYAN CARNEY</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016711</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2120.23"/></p>
<p>C. Full Name (Last, First, Middle Initial) RYAN CARNEY</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016963</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="887.39"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="3302.34"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) RYAN CARNEY	Transaction ID: SB21-0.016984 Date of Disbursement 11 / 05 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 2132.57
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) RYAN CARNEY	Transaction ID: SB21-0.017134 Date of Disbursement 11 / 18 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 79.00
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) RYAN CARNEY	Transaction ID: SB21-0.017197 Date of Disbursement 11 / 19 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 530.06
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2741.63
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) CHRIS CARR</p> <p>Mailing Address 2267 DESERT PRAIRIE ST</p> <p>City LAS VEGAS State NV Zip Code 89135</p> <p>Purpose of Disbursement POLITICAL STRATEGY CONSULTING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016858</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="9200.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) GENEVIEVE CARTER</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016712</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="784.73"/></p>
<p>C. Full Name (Last, First, Middle Initial) GENEVIEVE CARTER</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016985</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="789.21"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="10773.94"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) BENJAMIN J CASSIDY</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016986</p> <p>Date of Disbursement 11 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 1147.92</p>
<p>B. Full Name (Last, First, Middle Initial) BENJAMIN J CASSIDY</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.017199</p> <p>Date of Disbursement 11 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 285.87</p>
<p>C. Full Name (Last, First, Middle Initial) NAKKU CHUNG</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement LEGAL CONSULTING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016859</p> <p>Date of Disbursement 11 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2433.79

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) JOHN CLINE	Transaction ID: SA11A.13977525A Date of Disbursement 10 / 14 / 2010
	Mailing Address 325 7TH ST. NE SUITE 400	Amount of Each Disbursement this Period 250.00
	City: WASHINGTON State: DC Zip Code: 20004	
	Purpose of Disbursement: IN-KIND: FOOD AND BEVERAGE Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) KARRIE COHEN	Transaction ID: SB21-0.016627 Date of Disbursement 10 / 21 / 2010
	Mailing Address 1007 W BRADDOCK RD	Amount of Each Disbursement this Period 5060.00
	City: ALEXANDRIA State: VA Zip Code: 22302	
	Purpose of Disbursement: FINANCE CONSULTING Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ROBERT COUSINS	Transaction ID: SB21-0.016716 Date of Disbursement 10 / 22 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 1450.89
	City: WASHINGTON State: DC Zip Code: 20003	
	Purpose of Disbursement: PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	6760.89
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ROBERT COUSINS	Transaction ID: SB21-0.016883 Date of Disbursement
	Mailing Address 320 1ST ST SE	<input type="text" value="11"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL	<input type="text" value="4309.59"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ROBERT COUSINS	Transaction ID: SB21-0.016987 Date of Disbursement
	Mailing Address 320 1ST ST SE	<input type="text" value="11"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL	<input type="text" value="1455.37"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ROBERT COUSINS	Transaction ID: SB21-0.017136 Date of Disbursement
	Mailing Address 320 1ST ST SE	<input type="text" value="11"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL	<input type="text" value="520.54"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="6285.50"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) ROBERT COUSINS <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017200 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 362.72
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) TOM CRAWFORD <hr/> Mailing Address 325 7TH ST. NW SUITE 400 <hr/> City WASHINGRTON State DC Zip Code 20004 Purpose of Disbursement IN-KIND: FOOD AND BEVERAGE Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SA11A.13977526A Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 1 0
	Amount of Each Disbursement this Period 250.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) JOHN R CRISCUOLO <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016717 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0
	Amount of Each Disbursement this Period 1082.11
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	1694.83
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) JOHN R CRISCUOLO	Transaction ID: SB21-0.016988 Date of Disbursement 11 / 05 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 1086.57
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JOHN R CRISCUOLO	Transaction ID: SB21-0.017201 Date of Disbursement 11 / 19 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 270.53
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ERICA CROCKER	Transaction ID: SB21-0.016718 Date of Disbursement 10 / 22 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 1297.34
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2654.44
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
ERICA CROCKER

Transaction ID: SB21-0.016823
Date of Disbursement

Mailing Address 320 1ST ST SE

10 / 28 / 2010

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

Purpose of Disbursement
TRAVEL

202.74

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
ERICA CROCKER

Transaction ID: SB21-0.016989
Date of Disbursement

Mailing Address 320 1ST ST SE

11 / 05 / 2010

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

Purpose of Disbursement
PAYROLL

1301.81

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
ERICA CROCKER

Transaction ID: SB21-0.017202
Date of Disbursement

Mailing Address 320 1ST ST SE

11 / 19 / 2010

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

Purpose of Disbursement
PAYROLL

324.34

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

1828.89

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) CALEB F CROSBY <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016719 Date of Disbursement 10 / 22 / 2010
	Amount of Each Disbursement this Period 4226.93
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) CALEB F CROSBY <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016990 Date of Disbursement 11 / 05 / 2010
	Amount of Each Disbursement this Period 4239.27
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) CALEB F CROSBY <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017203 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 1056.73
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	9522.93
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) JEANNEMARIE DAVIS	Transaction ID: SA11A.13977524A
	Mailing Address 2213 ARYNESS DR.	Date of Disbursement 10 / 14 / 2010
	City VIENNA State VA Zip Code 22181	Amount of Each Disbursement this Period 1230.63
	Purpose of Disbursement IN-KIND: CATERING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JORDAN N DAVIS	Transaction ID: SB21-0.016720
	Mailing Address 320 1ST ST SE	Date of Disbursement 10 / 22 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 1667.10
	Purpose of Disbursement PAYROLL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) JORDAN N DAVIS	Transaction ID: SB21-0.016991
	Mailing Address 320 1ST ST SE	Date of Disbursement 11 / 05 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 1679.43
	Purpose of Disbursement PAYROLL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	4577.16
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 2725 / 3187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) JORDAN N DAVIS</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.017204</p> <p>Date of Disbursement 11 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 416.77</p>
<p>B. Full Name (Last, First, Middle Initial) JOHN J DESTEFANO</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016721</p> <p>Date of Disbursement 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 3006.01</p>
<p>C. Full Name (Last, First, Middle Initial) JOHN J DESTEFANO</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016992</p> <p>Date of Disbursement 11 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 3193.62</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>6616.40</p>
<p>TOTAL This Period (last page this line number only)</p>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) JOHN J DESTEFANO</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.017206</p> <p>Date of Disbursement 11 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 797.29</p>
<p>B. Full Name (Last, First, Middle Initial) MARIA I DIESEL</p> <p>Mailing Address 1533 JOHNNYS WAY</p> <p>City WEST CHESTER State PA Zip Code 19382</p> <p>Purpose of Disbursement FINANCE CONSULTING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.017104</p> <p>Date of Disbursement 11 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 4285.04</p>
<p>C. Full Name (Last, First, Middle Initial) MARIANA DIEZ</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016722</p> <p>Date of Disbursement 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 900.88</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5983.21

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MARIANA DIEZ	Transaction ID: SB21-0.016993
	Mailing Address 320 1ST ST SE	Date of Disbursement 11 / 05 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 905.35
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) MARIANA DIEZ	Transaction ID: SB21-0.017207
	Mailing Address 320 1ST ST SE	Date of Disbursement 11 / 19 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 225.22
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) RACHEL DRESEN	Transaction ID: SB21-0.016723
	Mailing Address 320 1ST ST SE	Date of Disbursement 10 / 22 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 1591.95
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2722.52
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) RACHEL DRESEN	Transaction ID: SB21-0.016994 Date of Disbursement 11 / 05 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 2166.35
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) RACHEL DRESEN	Transaction ID: SB21-0.017208 Date of Disbursement 11 / 19 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 397.99
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) JOHN DUARTE	Transaction ID: SA11A.13977529A Date of Disbursement 10 / 14 / 2010
	Mailing Address 6706 DUSTY LANE	Amount of Each Disbursement this Period 1080.00
	City MODESTO State CA Zip Code 95357	
	Purpose of Disbursement IN-KIND: WINE Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	3644.34
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) THOMAS J DUNN <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016724 Date of Disbursement 10 / 22 / 2010
	Amount of Each Disbursement this Period 1367.01
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) THOMAS J DUNN <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016995 Date of Disbursement 11 / 05 / 2010
	Amount of Each Disbursement this Period 1665.74
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) THOMAS J DUNN <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017209 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 341.75
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	3374.50
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) TRENT T EDWARDS	Transaction ID: SB21-0.016725 Date of Disbursement																			
	Mailing Address 320 1ST ST SE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	2		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	2		2	0	1	0												
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PAYROLL	<table border="1"><tr><td>2272.43</td></tr></table>	2272.43																		
2272.43																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) TRENT T EDWARDS	Transaction ID: SB21-0.016885 Date of Disbursement																			
	Mailing Address 320 1ST ST SE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	4		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	4		2	0	1	0												
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																			
	Purpose of Disbursement TRAVEL	<table border="1"><tr><td>1819.98</td></tr></table>	1819.98																		
1819.98																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) TRENT T EDWARDS	Transaction ID: SB21-0.016964 Date of Disbursement																			
	Mailing Address 320 1ST ST SE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	0		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	0		2	0	1	0												
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																			
	Purpose of Disbursement TRAVEL	<table border="1"><tr><td>1761.26</td></tr></table>	1761.26																		
1761.26																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>5853.67</td></tr></table>	5853.67
5853.67		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) TRENT T EDWARDS	Transaction ID: SB21-0.016996 Date of Disbursement
	Mailing Address 320 1ST ST SE	<input type="text" value="11"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL	<input type="text" value="2276.90"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) TRENT T EDWARDS	Transaction ID: SB21-0.017210 Date of Disbursement
	Mailing Address 320 1ST ST SE	<input type="text" value="11"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL	<input type="text" value="568.11"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) GEOFFREY EMBLER	Transaction ID: SB21-0.016726 Date of Disbursement
	Mailing Address 320 1ST ST SE	<input type="text" value="10"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL	<input type="text" value="3002.30"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5847.31"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) GEOFFREY EMBLER	Transaction ID: SB21-0.016997 Date of Disbursement 11 / 05 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 3002.31
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) GEOFFREY EMBLER	Transaction ID: SB21-0.017211 Date of Disbursement 11 / 19 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 750.57
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) THOMAS ERICKSON	Transaction ID: SB21-0.016727 Date of Disbursement 10 / 22 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 1665.01
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	5417.89
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) THOMAS ERICKSON	Transaction ID: SB21-0.016998 Date of Disbursement 11 / 05 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 1669.50
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) THOMAS ERICKSON	Transaction ID: SB21-0.017212 Date of Disbursement 11 / 19 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 416.25
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ALLAN FLEMING	Transaction ID: SB21-0.016956 Date of Disbursement 11 / 10 / 2010
	Mailing Address 320 FIRST STREET SE, 2ND FLOOR	Amount of Each Disbursement this Period 3.90
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement TRAVEL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2089.65
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) GABRIELE FORSYTH	Transaction ID: SB21-0.016628
	Mailing Address 320 1ST ST SE	Date of Disbursement 10 / 21 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 120.00
	Purpose of Disbursement TRAVEL	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) GABRIELE FORSYTH	Transaction ID: SB21-0.016728
	Mailing Address 320 1ST ST SE	Date of Disbursement 10 / 22 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 2003.05
	Purpose of Disbursement PAYROLL	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) GABRIELE FORSYTH	Transaction ID: SB21-0.016999
	Mailing Address 320 1ST ST SE	Date of Disbursement 11 / 05 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 2007.54
	Purpose of Disbursement PAYROLL	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	4130.59
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) GABRIELE FORSYTH	Transaction ID: SB21-0.017213
	Mailing Address 320 1ST ST SE	Date of Disbursement MM / DD / YYYY 11 / 19 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 500.76
	Purpose of Disbursement PAYROLL	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JESSICA C FURST	Transaction ID: SB21-0.016731
	Mailing Address 320 1ST ST SE	Date of Disbursement MM / DD / YYYY 10 / 22 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 3829.23
	Purpose of Disbursement PAYROLL	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) JESSICA C FURST	Transaction ID: SB21-0.016824
	Mailing Address 320 1ST ST SE	Date of Disbursement MM / DD / YYYY 10 / 28 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 68.00
	Purpose of Disbursement TRAVEL	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	4397.99
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) JESSICA C FURST <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement TRAVEL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016887 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 1 0
	Amount of Each Disbursement this Period 120.23
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) JESSICA C FURST <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017000 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 1 0
	Amount of Each Disbursement this Period 3833.70
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) JESSICA C FURST <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017218 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 957.31
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	4911.24
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) TIMOTHY GARON	Transaction ID: SB21-0.016888 Date of Disbursement 11 / 04 / 2010
	Mailing Address 320 1ST ST	Amount of Each Disbursement this Period 542.40
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement TRAVEL	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) TIMOTHY M GARON	Transaction ID: SB21-0.016730 Date of Disbursement 10 / 22 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 2361.46
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) TIMOTHY M GARON	Transaction ID: SB21-0.017001 Date of Disbursement 11 / 05 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 2365.93
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	5269.79
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) TIMOTHY M GARON	Transaction ID: SB21-0.017214 Date of Disbursement 11 / 19 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 590.37
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) STEPHANIE GENCO	Transaction ID: SB21-0.016732 Date of Disbursement 10 / 22 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 1544.90
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) STEPHANIE GENCO	Transaction ID: SB21-0.017002 Date of Disbursement 11 / 05 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 1549.38
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	3684.65
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) STEPHANIE GENCO	Transaction ID: SB21-0.017215 Date of Disbursement 11 / 19 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 386.23
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) SCOTT GLUCK	Transaction ID: SB21-0.016655 Date of Disbursement 10 / 21 / 2010
	Mailing Address 22187 SAM FRED RD	Amount of Each Disbursement this Period 449.78
	City MIDDLEBURG State VA Zip Code 20117	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) SCOTT GLUCK	Transaction ID: SB21-0.016863 Date of Disbursement 11 / 01 / 2010
	Mailing Address 22187 SAM FRED RD	Amount of Each Disbursement this Period 7500.00
	City MIDDLEBURG State VA Zip Code 20117	
	Purpose of Disbursement FINANCE CONSULTING	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	8336.01
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) ASHLEY GODWIN <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016733 Date of Disbursement 10 / 22 / 2010
	Amount of Each Disbursement this Period 1550.38
	Category/Type
	(Empty box)
B. Full Name (Last, First, Middle Initial) ASHLEY GODWIN <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017003 Date of Disbursement 11 / 05 / 2010
	Amount of Each Disbursement this Period 1554.86
	Category/Type
	(Empty box)
C. Full Name (Last, First, Middle Initial) ASHLEY GODWIN <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017216 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 387.60
	Category/Type
	(Empty box)

SUBTOTAL of Disbursements This Page (optional) ▶

3492.84

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) BRANDON M GRAVLEY <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016734 Date of Disbursement 10 / 22 / 2010
	Amount of Each Disbursement this Period 1536.39
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) BRANDON M GRAVLEY <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017004 Date of Disbursement 11 / 05 / 2010
	Amount of Each Disbursement this Period 1540.85
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) BRANDON M GRAVLEY <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017217 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 384.10
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ►

3461.34

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) GEORGE G GRIFFIN <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016735 Date of Disbursement 10 / 22 / 2010
	Amount of Each Disbursement this Period 2668.79
	Category/Type
	(Empty box for Category/Type)
B. Full Name (Last, First, Middle Initial) GEORGE G GRIFFIN <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017005 Date of Disbursement 11 / 05 / 2010
	Amount of Each Disbursement this Period 2681.13
	Category/Type
	(Empty box for Category/Type)
C. Full Name (Last, First, Middle Initial) GEORGE G GRIFFIN <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017219 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 667.20
	Category/Type
	(Empty box for Category/Type)

SUBTOTAL of Disbursements This Page (optional) ▶	6017.12
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) PETER J. HANLON</p> <p>Mailing Address 45 CALHOUN DR.</p> <p>City GREENWICH State CT Zip Code 06831</p> <p>Purpose of Disbursement IN-KIND: FOOD, BEVERAGE AND SPACE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SA11A.13977530A</p> <p>Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 1772.66</p>
<p>B. Full Name (Last, First, Middle Initial) MICHAEL HANSON</p> <p>Mailing Address 325 7TH ST. NW SUITE 400</p> <p>City WASHINGTON State DC Zip Code 20004</p> <p>Purpose of Disbursement IN-KIND: FOOD AND BEVERAGE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SA11A.13977527A</p> <p>Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p>
<p>C. Full Name (Last, First, Middle Initial) ORRIN L HARRISON</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016736</p> <p>Date of Disbursement 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 3964.37</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5987.03

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) ORRIN L HARRISON <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement TRAVEL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016965 Date of Disbursement 11 / 10 / 2010
	Amount of Each Disbursement this Period 308.88
	Category/ Type
	Disbursement For:
B. Full Name (Last, First, Middle Initial) ORRIN L HARRISON <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017006 Date of Disbursement 11 / 05 / 2010
	Amount of Each Disbursement this Period 3976.72
	Category/ Type
	Disbursement For:
C. Full Name (Last, First, Middle Initial) ORRIN L HARRISON <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017220 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 991.09
	Category/ Type
	Disbursement For:

SUBTOTAL of Disbursements This Page (optional) ▶	5276.69
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) HEATHER HENDERSON <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016737 Date of Disbursement 10 / 22 / 2010
	Amount of Each Disbursement this Period 1360.48
	Category/Type
	Category/Type
B. Full Name (Last, First, Middle Initial) HEATHER HENDERSON <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017007 Date of Disbursement 11 / 05 / 2010
	Amount of Each Disbursement this Period 1364.94
	Category/Type
	Category/Type
C. Full Name (Last, First, Middle Initial) HEATHER HENDERSON <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017224 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 340.12
	Category/Type
	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

3065.54

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ROBERT P HONOLD	Transaction ID: SB21-0.016738 Date of Disbursement																			
	Mailing Address 320 1ST ST SE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	2		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	2		2	0	1	0												
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PAYROLL	<table border="1"><tr><td>2916.06</td></tr></table>	2916.06																		
2916.06																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) ROBERT P HONOLD	Transaction ID: SB21-0.016966 Date of Disbursement																			
	Mailing Address 320 1ST ST SE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	0		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	0		2	0	1	0												
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																			
	Purpose of Disbursement TRAVEL	<table border="1"><tr><td>2346.79</td></tr></table>	2346.79																		
2346.79																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) ROBERT P HONOLD	Transaction ID: SB21-0.017008 Date of Disbursement																			
	Mailing Address 320 1ST ST SE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	5		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	5		2	0	1	0												
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PAYROLL	<table border="1"><tr><td>2920.53</td></tr></table>	2920.53																		
2920.53																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>8183.38</td></tr></table>	8183.38
8183.38		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) ROBERT P HONOLD <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017225 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 729.02
	Category/ Type
	Disbursement For:
B. Full Name (Last, First, Middle Initial) SOPHIE HUME <hr/> Mailing Address 3313 WESSYNTON WAY <hr/> City ALEXANDRIA State VA Zip Code 22309 Purpose of Disbursement POLITICAL CONSULTING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016890 Date of Disbursement 11 / 04 / 2010
	Amount of Each Disbursement this Period 500.00
	Category/ Type
	Disbursement For:
C. Full Name (Last, First, Middle Initial) CURTIS ISAKSON <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement TRAVEL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016460 Date of Disbursement 10 / 14 / 2010
	Amount of Each Disbursement this Period 215.10
	Category/ Type
	Disbursement For:

SUBTOTAL of Disbursements This Page (optional) ▶

1444.12

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CURTIS ISAKSON	Transaction ID: SB21-0.016739 Date of Disbursement 10 / 22 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 1132.59
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) CURTIS ISAKSON	Transaction ID: SB21-0.017009 Date of Disbursement 11 / 05 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 1137.05
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) CURTIS ISAKSON	Transaction ID: SB21-0.017222 Date of Disbursement 11 / 19 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 283.15
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2552.79
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) JESSICA JAMES <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016740 Date of Disbursement 10 / 22 / 2010
	Amount of Each Disbursement this Period 946.77
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) JESSICA JAMES <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017010 Date of Disbursement 11 / 05 / 2010
	Amount of Each Disbursement this Period 951.24
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) JESSICA JAMES <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017223 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 236.69
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

2134.70

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) JAMES R JETTON	Transaction ID: SB21-0.016742 Date of Disbursement 10 / 22 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 1534.00
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JAMES R JETTON	Transaction ID: SB21-0.016827 Date of Disbursement 10 / 28 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 439.00
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) JAMES R JETTON	Transaction ID: SB21-0.017011 Date of Disbursement 11 / 05 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 1538.47
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3511.47
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) JAMES R JETTON	Transaction ID: SB21-0.017226 Date of Disbursement 11 / 19 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 383.50
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) TODD R JOHNSON	Transaction ID: SB21-0.016741 Date of Disbursement 10 / 22 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 1850.70
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) TODD R JOHNSON	Transaction ID: SB21-0.017012 Date of Disbursement 11 / 05 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 1855.18
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	4089.38
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) TODD R JOHNSON <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017227 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 462.68
B. Full Name (Last, First, Middle Initial) MARY E KAHLSTORF <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016743 Date of Disbursement 10 / 22 / 2010
	Amount of Each Disbursement this Period 1321.34
C. Full Name (Last, First, Middle Initial) MARY E KAHLSTORF <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement TRAVEL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016967 Date of Disbursement 11 / 10 / 2010
	Amount of Each Disbursement this Period 1476.33

SUBTOTAL of Disbursements This Page (optional) ▶

3260.35

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MARY E KAHLSTORF	Transaction ID: SB21-0.017013
	Mailing Address 320 1ST ST SE	Date of Disbursement 11 / 05 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 1325.81
	Purpose of Disbursement PAYROLL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) MARY E KAHLSTORF	Transaction ID: SB21-0.017228
	Mailing Address 320 1ST ST SE	Date of Disbursement 11 / 19 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 330.34
	Purpose of Disbursement PAYROLL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MICHAEL R KAPLAN	Transaction ID: SB21-0.016750
	Mailing Address 320 1ST ST SE	Date of Disbursement 10 / 22 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 1006.20
	Purpose of Disbursement PAYROLL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	2662.35
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MICHAEL R KAPLAN

Transaction ID: SB21-0.017014
Date of Disbursement

Mailing Address 320 1ST ST SE

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	5		2	0	1	0

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

Purpose of Disbursement
PAYROLL

--

1010.67

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
MICHAEL R KAPLAN

Transaction ID: SB21-0.017229
Date of Disbursement

Mailing Address 320 1ST ST SE

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	9		2	0	1	0

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

Purpose of Disbursement
PAYROLL

--

251.55

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
NICHOLAS KARELLAS

Transaction ID: SB21-0.016751
Date of Disbursement

Mailing Address 320 1ST ST SE

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	2		2	0	1	0

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

Purpose of Disbursement
PAYROLL

--

1325.38

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

2587.60

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) NICHOLAS KARELLAS</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016892</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1289.59"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) NICHOLAS KARELLAS</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.017015</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1329.86"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) NICHOLAS KARELLAS</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.017230</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="331.35"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="2950.80"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) JANICE L KNOPP	Transaction ID: SB21-0.016868 Date of Disbursement 11 / 01 / 2010
	Mailing Address 236 KENTUCKY AVE SE	Amount of Each Disbursement this Period 10000.00
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement FINANCE CONSULTING	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ALEXANDER LAWHON	Transaction ID: SB21-0.016745 Date of Disbursement 10 / 22 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 2898.62
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ALEXANDER LAWHON	Transaction ID: SB21-0.016937 Date of Disbursement 11 / 09 / 2010
	Mailing Address 320 FIRST STREET SE	Amount of Each Disbursement this Period 964.10
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement TRAVEL	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	13862.72
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ALEXANDER LAWHON	Transaction ID: SB21-0.017016 Date of Disbursement
	Mailing Address 320 1ST ST SE	<input type="text" value="11"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL	<input type="text" value="2910.96"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ALEXANDER LAWHON	Transaction ID: SB21-0.017231 Date of Disbursement
	Mailing Address 320 1ST ST SE	<input type="text" value="11"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL	<input type="text" value="724.66"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) SHAUN LEDGERWOOD	Transaction ID: SB21-0.016747 Date of Disbursement
	Mailing Address 320 1ST ST SE	<input type="text" value="10"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL	<input type="text" value="1972.02"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5607.64"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) SHAUN LEDGERWOOD	Transaction ID: SB21-0.017017 Date of Disbursement
	Mailing Address 320 1ST ST SE	<input type="text" value="11"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL	<input type="text" value="1984.37"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) SHAUN LEDGERWOOD	Transaction ID: SB21-0.017232 Date of Disbursement
	Mailing Address 320 1ST ST SE	<input type="text" value="11"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL	<input type="text" value="493.01"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) PAUL A LINDSAY	Transaction ID: SB21-0.016748 Date of Disbursement
	Mailing Address 320 1ST ST SE	<input type="text" value="10"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL	<input type="text" value="2183.82"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4661.20"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) PAUL A LINDSAY	Transaction ID: SB21-0.017018
	Mailing Address 320 1ST ST SE	Date of Disbursement MM / DD / YYYY 11 / 05 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 2188.29
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PAUL A LINDSAY	Transaction ID: SB21-0.017233
	Mailing Address 320 1ST ST SE	Date of Disbursement MM / DD / YYYY 11 / 19 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 545.95
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MR. JEFFREY LISKO	Transaction ID: SA11A.13977519A
	Mailing Address 9116 STEPHENS POINTE	Date of Disbursement MM / DD / YYYY 10 / 25 / 2010
	City EDEN PRAIRIE State MN Zip Code 55347	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement IN-KIND: FOOD AND DRINKS Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	5234.24
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) NELSON LITTERST	Transaction ID: SA11A.13977528A
	Mailing Address 325 7TH ST. NW SUITE 400	Date of Disbursement 10 / 14 / 2010
	City: WASHINGTON State: DC Zip Code: 20004	Amount of Each Disbursement this Period 250.00
	Purpose of Disbursement: IN-KIND: FOOD AND BEVERAGE	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) SAMUEL LOEWNER	Transaction ID: SB21-0.016749
	Mailing Address 320 1ST ST SE	Date of Disbursement 10 / 22 / 2010
	City: WASHINGTON State: DC Zip Code: 20003	Amount of Each Disbursement this Period 525.43
	Purpose of Disbursement: PAYROLL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) SAMUEL LOEWNER	Transaction ID: SB21-0.017019
	Mailing Address 320 1ST ST SE	Date of Disbursement 11 / 05 / 2010
	City: WASHINGTON State: DC Zip Code: 20003	Amount of Each Disbursement this Period 529.91
	Purpose of Disbursement: PAYROLL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	1305.34
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) REBECCA MARK <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016752 Date of Disbursement 10 / 22 / 2010	Amount of Each Disbursement this Period 1319.92
B.	Full Name (Last, First, Middle Initial) REBECCA MARK <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017021 Date of Disbursement 11 / 05 / 2010	Amount of Each Disbursement this Period 1324.38
C.	Full Name (Last, First, Middle Initial) REBECCA MARK <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017235 Date of Disbursement 11 / 19 / 2010	Amount of Each Disbursement this Period 329.98

SUBTOTAL of Disbursements This Page (optional) ▶

2974.28

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) SALVATORE MAZZOLA	Transaction ID: SB21-0.016753 Date of Disbursement 10 / 22 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 2173.50
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) SALVATORE MAZZOLA	Transaction ID: SB21-0.017025 Date of Disbursement 11 / 05 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 2185.83
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) SALVATORE MAZZOLA	Transaction ID: SB21-0.017236 Date of Disbursement 11 / 19 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 543.38
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	4902.71
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) SALLY D MCALLISTER <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016754 Date of Disbursement 10 / 22 / 2010
	Amount of Each Disbursement this Period 2543.44
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) SALLY D MCALLISTER <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017027 Date of Disbursement 11 / 05 / 2010
	Amount of Each Disbursement this Period 2547.91
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) SALLY D MCALLISTER <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017237 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 635.86
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

5727.21

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) BROCK MCCLEARY <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016755 Date of Disbursement 10 / 22 / 2010
	Amount of Each Disbursement this Period 2470.91
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) BROCK MCCLEARY <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017029 Date of Disbursement 11 / 05 / 2010
	Amount of Each Disbursement this Period 2483.25
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) BROCK MCCLEARY <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017238 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 617.73
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

5571.89

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) KEVIN W MCGRANN <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016756 Date of Disbursement 10 / 22 / 2010
	Amount of Each Disbursement this Period 685.21
	Category/Type
	Category/Type
B. Full Name (Last, First, Middle Initial) KEVIN W MCGRANN <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement TRAVEL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016970 Date of Disbursement 11 / 10 / 2010
	Amount of Each Disbursement this Period 26577.94
	Category/Type
	Category/Type
C. Full Name (Last, First, Middle Initial) KEVIN W MCGRANN <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017031 Date of Disbursement 11 / 05 / 2010
	Amount of Each Disbursement this Period 689.68
	Category/Type
	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

27952.83

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) KEVIN W MCGRANN	Transaction ID: SB21-0.017239 Date of Disbursement 11 / 19 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 171.30
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) CATHERINE K MILLER	Transaction ID: SB21-0.017144 Date of Disbursement 11 / 18 / 2010
	Mailing Address 3342 RALEIGH STREET	Amount of Each Disbursement this Period 6000.00
	City DENVER State CO Zip Code 80212	
	Purpose of Disbursement POLITICAL STRATEGY CONSULTING	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) BRANDON MILLS	Transaction ID: SB21-0.016757 Date of Disbursement 10 / 22 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 1127.94
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	7299.24
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) BRANDON MILLS	Transaction ID: SB21-0.017033
	Mailing Address 320 1ST ST SE	Date of Disbursement 11 / 05 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 1132.40
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) BRANDON MILLS	Transaction ID: SB21-0.017240
	Mailing Address 320 1ST ST SE	Date of Disbursement 11 / 19 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 281.99
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) GEORGE NASSAR	Transaction ID: SB21-0.016758
	Mailing Address 320 1ST ST SE	Date of Disbursement 10 / 22 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 1059.15
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2473.54
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) GEORGE NASSAR	Transaction ID: SB21-0.016832 Date of Disbursement 10 / 28 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 134.90
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) GEORGE NASSAR	Transaction ID: SB21-0.016971 Date of Disbursement 11 / 10 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 3074.65
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) GEORGE NASSAR	Transaction ID: SB21-0.017034 Date of Disbursement 11 / 05 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 1063.62
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	4273.17
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
GEORGE NASSAR

Transaction ID: SB21-0.017241
Date of Disbursement

Mailing Address 320 1ST ST SE

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	9		2	0	1	0

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

Purpose of Disbursement
PAYROLL

--

264.79

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
JENNIFER NELSON

Transaction ID: SB21-0.016467
Date of Disbursement

Mailing Address 320 FIRST STREET SE

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	1	0

City WASHINGTON State DC Zip Code 20002

Amount of Each Disbursement this Period

Purpose of Disbursement
TRAVEL

--

29.50

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
JENNIFER NELSON

Transaction ID: SB21-0.016759
Date of Disbursement

Mailing Address 320 1ST ST SE

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	2		2	0	1	0

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

Purpose of Disbursement
PAYROLL

--

1380.62

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

1674.91

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) JENNIFER NELSON</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.017035</p> <p>Date of Disbursement 11 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 1385.09</p>
<p>B. Full Name (Last, First, Middle Initial) JENNIFER NELSON</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.017242</p> <p>Date of Disbursement 11 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 345.15</p>
<p>C. Full Name (Last, First, Middle Initial) JOHN D NEUMANN</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016760</p> <p>Date of Disbursement 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 2888.75</p>

SUBTOTAL of Disbursements This Page (optional)	4618.99
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 2772 / 3187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) JOHN D NEUMANN	Transaction ID: SB21-0.017037 Date of Disbursement 11 / 05 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 2645.73
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JOHN D NEUMANN	Transaction ID: SB21-0.017243 Date of Disbursement 11 / 19 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 660.31
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) BENJAMIN M OTTENHOFF	Transaction ID: SB21-0.016633 Date of Disbursement 10 / 21 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 42.36
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement SUBSCRIPTION Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3348.40

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) BENJAMIN M OTTENHOFF	Transaction ID: SB21-0.016761 Date of Disbursement																			
	Mailing Address 320 1ST ST SE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>2</td><td>2</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	2	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	2	2	/	2	0	1	0												
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PAYROLL	<table border="1"><tr><td>1782.47</td></tr></table>	1782.47																		
1782.47																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) BENJAMIN M OTTENHOFF	Transaction ID: SB21-0.017039 Date of Disbursement																			
	Mailing Address 320 1ST ST SE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>0</td><td>5</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	5	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	0	5	/	2	0	1	0												
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PAYROLL	<table border="1"><tr><td>1786.95</td></tr></table>	1786.95																		
1786.95																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) BENJAMIN M OTTENHOFF	Transaction ID: SB21-0.017244 Date of Disbursement																			
	Mailing Address 320 1ST ST SE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	9	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	1	9	/	2	0	1	0												
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PAYROLL	<table border="1"><tr><td>445.62</td></tr></table>	445.62																		
445.62																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>4015.04</td></tr></table>	4015.04
4015.04		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) LIBRADO PADILLA <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016762 Date of Disbursement 10 / 22 / 2010
	Amount of Each Disbursement this Period 2082.00
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) LIBRADO PADILLA <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement TRAVEL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016836 Date of Disbursement 10 / 28 / 2010
	Amount of Each Disbursement this Period 2278.05
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) LIBRADO PADILLA <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017041 Date of Disbursement 11 / 05 / 2010
	Amount of Each Disbursement this Period 2086.46
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	6446.51
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) LIBRADO PADILLA	Transaction ID: SB21-0.017153 Date of Disbursement 11 / 18 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 1437.82
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement TRAVEL	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) LIBRADO PADILLA	Transaction ID: SB21-0.017245 Date of Disbursement 11 / 19 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 520.50
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) LINDSAY PERKINSON	Transaction ID: SB21-0.016763 Date of Disbursement 10 / 22 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 1359.84
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3318.16
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) LINDSAY PERKINSON	Transaction ID: SB21-0.017043 Date of Disbursement 11 / 05 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 1364.31
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) LINDSAY PERKINSON	Transaction ID: SB21-0.017246 Date of Disbursement 11 / 19 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 339.96
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) DANA PIERSON	Transaction ID: SA11A.13977520A Date of Disbursement 10 / 25 / 2010
	Mailing Address 25 GRAND MANOR COURT	Amount of Each Disbursement this Period 2000.00
	City SUGAR LAND State TX Zip Code 77478	
	Purpose of Disbursement IN-KIND: FOOD AND BEVERAGE Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3704.27
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 2777 / 3187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) WILLIAM PLASTER	Transaction ID: SB21-0.016867 Date of Disbursement 11 / 01 / 2010
	Mailing Address 14 E BELLEFONTE AVE	Amount of Each Disbursement this Period 7500.00
	City ALEXANDRIA State VA Zip Code 22301	
	Purpose of Disbursement COMPUTER SUPPORT	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) BOB POOLE	Transaction ID: SA11A.13977531A Date of Disbursement 10 / 14 / 2010
	Mailing Address 2121 OLD GATESBURG ROAD SUITE 200	Amount of Each Disbursement this Period 1698.02
	City STATE COLLEGE State PA Zip Code 16803	
	Purpose of Disbursement IN-KIND: FOOD, BEVERAGE AND POSTAGE	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) THOMAS PREWITT	Transaction ID: SB21-0.016764 Date of Disbursement 10 / 22 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 1201.09
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	10399.11
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) THOMAS PREWITT <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017045 Date of Disbursement 11 / 05 / 2010 <hr/> Amount of Each Disbursement this Period 1205.55
B.	Full Name (Last, First, Middle Initial) THOMAS PREWITT <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017247 Date of Disbursement 11 / 19 / 2010 <hr/> Amount of Each Disbursement this Period 300.27
C.	Full Name (Last, First, Middle Initial) JOHN R RANDALL <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016765 Date of Disbursement 10 / 22 / 2010 <hr/> Amount of Each Disbursement this Period 2847.15

SUBTOTAL of Disbursements This Page (optional) ▶	4352.97
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) JOHN R RANDALL <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017047 Date of Disbursement 11 / 05 / 2010
	Amount of Each Disbursement this Period 2859.49
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) JOHN R RANDALL <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017248 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 711.79
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) BRANDON RAY <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016768 Date of Disbursement 10 / 22 / 2010
	Amount of Each Disbursement this Period 904.65
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

4475.93

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) BRANDON RAY	Transaction ID: SB21-0.017049
	Mailing Address 320 1ST ST SE	Date of Disbursement 11 / 05 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 909.12
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) BRANDON RAY	Transaction ID: SB21-0.017249
	Mailing Address 320 1ST ST SE	Date of Disbursement 11 / 19 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 226.16
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) CELIA RILEY	Transaction ID: SB21-0.016766
	Mailing Address 320 1ST ST SE	Date of Disbursement 10 / 22 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 1424.26
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2559.54
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) CELIA RILEY</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.017051</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1703.71"/></p>
<p>B. Full Name (Last, First, Middle Initial) CELIA RILEY</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.017250</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="352.91"/></p>
<p>C. Full Name (Last, First, Middle Initial) JESSE H ROMAN</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016767</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="882.44"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="2939.06"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) JESSE H ROMAN	Transaction ID: SB21-0.017053 Date of Disbursement 11 / 05 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 886.91
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JESSE H ROMAN	Transaction ID: SB21-0.017251 Date of Disbursement 11 / 19 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 220.61
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MARY RUNK	Transaction ID: SB21-0.016769 Date of Disbursement 10 / 22 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 1010.05
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2117.57
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) MARY RUNK</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.017055</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1014.51"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) MARY RUNK</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.017252</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="252.51"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) PABLO SANCHEZ</p> <p>Mailing Address 1032 N DANVILLE ST</p> <p>City ARLINGTON State VA Zip Code 22204</p> <p>Purpose of Disbursement PERSONNEL SVC</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016870</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5167.00"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) JARROD SCHLENKER	Transaction ID: SB21-0.016770 Date of Disbursement
	Mailing Address 320 1ST ST SE	<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL	<input type="text" value="1341.69"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JARROD SCHLENKER	Transaction ID: SB21-0.017057 Date of Disbursement
	Mailing Address 320 1ST ST SE	<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2010"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL	<input type="text" value="1346.15"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) JARROD SCHLENKER	Transaction ID: SB21-0.017253 Date of Disbursement
	Mailing Address 320 1ST ST SE	<input type="text" value="11"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL	<input type="text" value="335.43"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3023.27"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) JOSEPH G SCIARRINO	Transaction ID: SB21-0.016771 Date of Disbursement 10 / 22 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 1186.36
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JOSEPH G SCIARRINO	Transaction ID: SB21-0.017059 Date of Disbursement 11 / 05 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 1190.82
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) JOSEPH G SCIARRINO	Transaction ID: SB21-0.017254 Date of Disbursement 11 / 19 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 296.59
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2673.77
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ANDREW SERE	Transaction ID: SB21-0.016772
	Mailing Address 320 1ST ST SE	Date of Disbursement 10 / 22 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 1930.46
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ANDREW SERE	Transaction ID: SB21-0.017061
	Mailing Address 320 1ST ST SE	Date of Disbursement 11 / 05 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 1934.94
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ANDREW SERE	Transaction ID: SB21-0.017255
	Mailing Address 320 1ST ST SE	Date of Disbursement 11 / 19 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 482.62
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

4348.02

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) PETE SESSIONS	Transaction ID: SB21-0.016839
	Mailing Address 320 1ST ST SE	Date of Disbursement 10 / 28 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 415.97
	Purpose of Disbursement TRAVEL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) PETE SESSIONS	Transaction ID: SB21-0.016972
	Mailing Address 320 1ST ST SE	Date of Disbursement 11 / 10 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 278.50
	Purpose of Disbursement TRAVEL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) DONALD P SEYMOUR, JR	Transaction ID: SB21-0.016778
	Mailing Address 320 1ST ST SE	Date of Disbursement 10 / 22 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 601.75
	Purpose of Disbursement PAYROLL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶

1296.22

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) DONALD P SEYMOUR, JR <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017063 Date of Disbursement 11 / 05 / 2010
	Amount of Each Disbursement this Period 614.09
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) DONALD P SEYMOUR, JR <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017256 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 150.44
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) JENNIFER S SHEFFIELD <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement TRAVEL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016477 Date of Disbursement 10 / 14 / 2010
	Amount of Each Disbursement this Period 256.92
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ►

1021.45

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) JENNIFER S SHEFFIELD Mailing Address 320 1ST ST SE City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016777 Date of Disbursement 10 / 22 / 2010 Amount of Each Disbursement this Period 3099.55 Category/Type
B.	Full Name (Last, First, Middle Initial) JENNIFER S SHEFFIELD Mailing Address 320 1ST ST SE City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016958 Date of Disbursement 11 / 10 / 2010 Amount of Each Disbursement this Period 195.72 Category/Type
C.	Full Name (Last, First, Middle Initial) JENNIFER S SHEFFIELD Mailing Address 320 1ST ST SE City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017065 Date of Disbursement 11 / 05 / 2010 Amount of Each Disbursement this Period 3104.02 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

6399.29

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 2790 / 3187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) JENNIFER S SHEFFIELD</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.017257</p> <p>Date of Disbursement</p> <p><input type="text" value="11"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="844.16"/></p>
<p>B. Full Name (Last, First, Middle Initial) MIKE S SHIELDS</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016774</p> <p>Date of Disbursement</p> <p><input type="text" value="10"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4459.13"/></p>
<p>C. Full Name (Last, First, Middle Initial) MIKE S SHIELDS</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.017067</p> <p>Date of Disbursement</p> <p><input type="text" value="11"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4471.47"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MIKE S SHIELDS	Transaction ID: SB21-0.017154 Date of Disbursement 11 / 18 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 2713.10
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) MIKE S SHIELDS	Transaction ID: SB21-0.017165 Date of Disbursement 11 / 18 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 114.72
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MIKE S SHIELDS	Transaction ID: SB21-0.017258 Date of Disbursement 11 / 19 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 1114.78
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3942.60

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) PAUL SILVIA	Transaction ID: SA11A.13977532A
	Mailing Address 2121 OLD GATESBURG ROAD SUITE 200	Date of Disbursement 10 / 14 / 2010
	City State Zip Code STATE COLLEGE PA 16803	Amount of Each Disbursement this Period 1698.02
	Purpose of Disbursement IN-KIND: FOOD, BEVERAGE AND POSTAGE	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) KENNETH P SPAIN	Transaction ID: SB21-0.016775
	Mailing Address 320 1ST ST SE	Date of Disbursement 10 / 22 / 2010
	City State Zip Code WASHINGTON DC 20003	Amount of Each Disbursement this Period 3456.52
	Purpose of Disbursement PAYROLL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) KENNETH P SPAIN	Transaction ID: SB21-0.016840
	Mailing Address 320 1ST ST SE	Date of Disbursement 10 / 28 / 2010
	City State Zip Code WASHINGTON DC 20003	Amount of Each Disbursement this Period 141.85
	Purpose of Disbursement TRAVEL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	5296.39
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) KENNETH P SPAIN Mailing Address 320 1ST ST SE City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017069 Date of Disbursement 11 / 05 / 2010	Amount of Each Disbursement this Period 3456.52
B.	Full Name (Last, First, Middle Initial) KENNETH P SPAIN Mailing Address 320 1ST ST SE City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017259 Date of Disbursement 11 / 19 / 2010	Amount of Each Disbursement this Period 864.13
C.	Full Name (Last, First, Middle Initial) SAVANNAH R STEELE Mailing Address 320 1ST ST SE City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016776 Date of Disbursement 10 / 22 / 2010	Amount of Each Disbursement this Period 1050.81

SUBTOTAL of Disbursements This Page (optional) ▶

5371.46

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) SAVANNAH R STEELE	Transaction ID: SB21-0.017071
	Mailing Address 320 1ST ST SE	Date of Disbursement MM / DD / YYYY 11 / 05 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 1055.29
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) SAVANNAH R STEELE	Transaction ID: SB21-0.017260
	Mailing Address 320 1ST ST SE	Date of Disbursement MM / DD / YYYY 11 / 19 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 262.70
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) KAYLA SULZER	Transaction ID: SB21-0.016779
	Mailing Address 320 1ST ST SE	Date of Disbursement MM / DD / YYYY 10 / 22 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 897.42
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2215.41
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 2795 / 3187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) KAYLA SULZER	Transaction ID: SB21-0.017073 Date of Disbursement 11 / 05 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 901.91
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) KAYLA SULZER	Transaction ID: SB21-0.017261 Date of Disbursement 11 / 19 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 224.36
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) JONATHAN THOMPSON	Transaction ID: SB21-0.016780 Date of Disbursement 10 / 22 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 1196.36
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2322.63
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
JONATHAN THOMPSON

Transaction ID: SB21-0.017075
Date of Disbursement

Mailing Address 320 1ST ST SE

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	5		2	0	1	0

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

Purpose of Disbursement
PAYROLL

--

1200.82

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
JONATHAN THOMPSON

Transaction ID: SB21-0.017262
Date of Disbursement

Mailing Address 320 1ST ST SE

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	9		2	0	1	0

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

Purpose of Disbursement
PAYROLL

--

299.09

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
HOLLY THURMOND

Transaction ID: SB21-0.016781
Date of Disbursement

Mailing Address 320 1ST ST SE

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	2		2	0	1	0

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

Purpose of Disbursement
PAYROLL

--

897.42

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

2397.33

TOTAL This Period (last page this line number only) ►

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) HOLLY THURMOND	Transaction ID: SB21-0.016973 Date of Disbursement 11 / 10 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 242.61
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement TRAVEL	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) HOLLY THURMOND	Transaction ID: SB21-0.017077 Date of Disbursement 11 / 05 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 901.89
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) HOLLY THURMOND	Transaction ID: SB21-0.017263 Date of Disbursement 11 / 19 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 224.36
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1368.86
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) ELIZABETH W VERRILL <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement TRAVEL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016483 Date of Disbursement 10 / 14 / 2010
	Amount of Each Disbursement this Period 2113.85
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) ELIZABETH W VERRILL <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016784 Date of Disbursement 10 / 22 / 2010
	Amount of Each Disbursement this Period 4421.88
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) ELIZABETH W VERRILL <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement TRAVEL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016960 Date of Disbursement 11 / 10 / 2010
	Amount of Each Disbursement this Period 3907.85
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

10443.58

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ELIZABETH W VERRILL Mailing Address 320 1ST ST SE City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017085 Date of Disbursement 11 / 05 / 2010	Amount of Each Disbursement this Period 4434.22
B.	Full Name (Last, First, Middle Initial) ELIZABETH W VERRILL Mailing Address 320 1ST ST SE City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017118 Date of Disbursement 11 / 18 / 2010	Amount of Each Disbursement this Period 343.98
C.	Full Name (Last, First, Middle Initial) ELIZABETH W VERRILL Mailing Address 320 1ST ST SE City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017267 Date of Disbursement 11 / 19 / 2010	Amount of Each Disbursement this Period 1105.47

SUBTOTAL of Disbursements This Page (optional)	5883.67
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MARY ANN VOIGT	Transaction ID: SB21-0.016674 Date of Disbursement
	Mailing Address 320 1ST ST SE	<input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL	<input type="text" value="117.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) MARY ANN VOIGT	Transaction ID: SB21-0.016786 Date of Disbursement
	Mailing Address 320 1ST ST SE	<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL	<input type="text" value="1706.53"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MARY ANN VOIGT	Transaction ID: SB21-0.017086 Date of Disbursement
	Mailing Address 320 1ST ST SE	<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2010"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL	<input type="text" value="1711.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3534.53"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MARY ANN VOIGT	Transaction ID: SB21-0.017268 Date of Disbursement 11 / 19 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 426.63
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAYROLL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JEREMIAH WAGNER	Transaction ID: SB21-0.016844 Date of Disbursement 10 / 28 / 2010
	Mailing Address 101 MCMILLEN AVENUE	Amount of Each Disbursement this Period 187.55
	City COLUMBUS State OH Zip Code 43201	
	Purpose of Disbursement TRAVEL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) GREG WALDEN	Transaction ID: SB21-0.017160 Date of Disbursement 11 / 18 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 309.92
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement TRAVEL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	924.10
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) BRIAN O WALSH <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016785 Date of Disbursement 10 / 22 / 2010
	Amount of Each Disbursement this Period 3972.05
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) BRIAN O WALSH <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017087 Date of Disbursement 11 / 05 / 2010
	Amount of Each Disbursement this Period 3976.52
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) BRIAN O WALSH <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement TRAVEL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017161 Date of Disbursement 11 / 18 / 2010
	Amount of Each Disbursement this Period 945.69
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

8894.26

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) BRIAN O WALSH	Transaction ID: SB21-0.017269
	Mailing Address 320 1ST ST SE	Date of Disbursement MM / DD / YYYY 11 / 19 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 993.01
	Purpose of Disbursement PAYROLL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) CAITLIN WOHLFARTH	Transaction ID: SB21-0.016788
	Mailing Address 320 1ST ST SE	Date of Disbursement MM / DD / YYYY 10 / 22 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 1228.63
	Purpose of Disbursement PAYROLL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) CAITLIN WOHLFARTH	Transaction ID: SB21-0.017088
	Mailing Address 320 1ST ST SE	Date of Disbursement MM / DD / YYYY 11 / 05 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 1233.10
	Purpose of Disbursement PAYROLL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	3454.74
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) CAITLIN WOHLFARTH <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017270 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 307.16
	Category/ Type
	Disbursement For:
B. Full Name (Last, First, Middle Initial) JOE N WYNN, JR <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016787 Date of Disbursement 10 / 22 / 2010
	Amount of Each Disbursement this Period 1373.49
	Category/ Type
	Disbursement For:
C. Full Name (Last, First, Middle Initial) JOE N WYNN, JR <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017089 Date of Disbursement 11 / 05 / 2010
	Amount of Each Disbursement this Period 1377.96
	Category/ Type
	Disbursement For:

SUBTOTAL of Disbursements This Page (optional) ▶	3058.61
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) JOE N WYNN, JR</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.017271</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="343.38"/></p>
<p>B. Full Name (Last, First, Middle Initial) ETHAN A ZORFAS</p> <p>Mailing Address 59 ST. PAUL STREET, UNIT 3</p> <p>City BROOKLINE State MA Zip Code 02446</p> <p>Purpose of Disbursement FINANCE CONSULTING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016484</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2795.34"/></p>
<p>C. Full Name (Last, First, Middle Initial) ALTEC PRODUCTS INC</p> <p>Mailing Address 23422 MILL CREEK DR STE 225</p> <p>City LAGUNA HILLS State CA Zip Code 92653</p> <p>Purpose of Disbursement OFFICE SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016486</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="82.49"/></p>

SUBTOTAL of Disbursements This Page (optional) ►

TOTAL This Period (last page this line number only) ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) AMERICA DIRECT INC	Transaction ID: SB21-0.016446 Date of Disbursement
	Mailing Address 1272 CORPORATE PARK DRIVE 2ND FL	<input type="text" value="10"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City FOREST State VA Zip Code 24551	Amount of Each Disbursement this Period
	Purpose of Disbursement POSTAGE	<input type="text" value="1163.88"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) AMERICA DIRECT INC	Transaction ID: SB21-0.016929 Date of Disbursement
	Mailing Address 1272 CORPORATE PARK DRIVE 2ND FL	<input type="text" value="11"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City FOREST State VA Zip Code 24551	Amount of Each Disbursement this Period
	Purpose of Disbursement PRINTING	<input type="text" value="3425.22"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) AMERICA DIRECT INC	Transaction ID: SB21-0.017097 Date of Disbursement
	Mailing Address 1272 CORPORATE PARK DRIVE 2ND FL	<input type="text" value="11"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City FOREST State VA Zip Code 24551	Amount of Each Disbursement this Period
	Purpose of Disbursement PRINTING	<input type="text" value="30705.56"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS Mailing Address PO BOX 1270 City NEWARK State NJ Zip Code 07101-1270 Purpose of Disbursement CREDIT CARD PAYMENT Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016910 Date of Disbursement 10 / 14 / 2010
	Amount of Each Disbursement this Period 93960.08

B. Full Name (Last, First, Middle Initial) 37 SIGNALS DOT COM Mailing Address 400 N MAY ST #301 City CHICAGO State IL Zip Code 60622 Purpose of Disbursement WEB SERVICE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.019961 Date of Disbursement 10 / 14 / 2010
	Amount of Each Disbursement this Period 24.00 [MEMO ITEM]

C. Full Name (Last, First, Middle Initial) ACCESS AMERICA Mailing Address PO BOX 71533 City RICHMOND State VA Zip Code 23286 Purpose of Disbursement INSURANCE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.020100 Date of Disbursement 10 / 14 / 2010
	Amount of Each Disbursement this Period 18.75 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	93960.08
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) ALASKA AIRLINES</p> <p>Mailing Address PO BOX 68900</p> <p>City SEATTLE State WA Zip Code 98168</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.019963</p> <p>Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 609.20</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) AMAZON.COM</p> <p>Mailing Address 1200 12TH AVE</p> <p>City SEATTLE State WA Zip Code 98144</p> <p>Purpose of Disbursement OFFICE SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.019965</p> <p>Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 248.97</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) AMERICAN AIRLINES</p> <p>Mailing Address PO BOX 620081</p> <p>City DALLAS State TX Zip Code 75262</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.019975</p> <p>Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 239.40</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) AMERICAN AIRLINES</p> <p>Mailing Address PO BOX 620081</p> <p>City DALLAS State TX Zip Code 75262</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.019977</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="274.70"/></p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) AMERICAN AIRLINES</p> <p>Mailing Address PO BOX 620081</p> <p>City DALLAS State TX Zip Code 75262</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.019979</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="839.40"/></p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) AMERICAN AIRLINES</p> <p>Mailing Address PO BOX 620081</p> <p>City DALLAS State TX Zip Code 75262</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.019981</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="743.40"/></p> <p>[MEMO ITEM]</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="0.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) AMERICAN AIRLINES</p> <p>Mailing Address PO BOX 620081</p> <p>City DALLAS State TX Zip Code 75262</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.019983</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="185.40"/></p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) AMERICAN AIRLINES</p> <p>Mailing Address PO BOX 620081</p> <p>City DALLAS State TX Zip Code 75262</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.019985</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="751.40"/></p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) AMERICAN AIRLINES</p> <p>Mailing Address PO BOX 620081</p> <p>City DALLAS State TX Zip Code 75262</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.019987</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="491.40"/></p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) AMTRAK	Transaction ID: SB21-0.019969 Date of Disbursement 10 / 14 / 2010
	Mailing Address 60 MASSACHUSETTS AVE NW	Amount of Each Disbursement this Period 680.00
	City WASHINGTON State DC Zip Code 20002	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) AMTRAK	Transaction ID: SB21-0.019971 Date of Disbursement 10 / 14 / 2010
	Mailing Address 60 MASSACHUSETTS AVE NW	Amount of Each Disbursement this Period 225.00
	City WASHINGTON State DC Zip Code 20002	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) AMTRAK	Transaction ID: SB21-0.019973 Date of Disbursement 10 / 14 / 2010
	Mailing Address 60 MASSACHUSETTS AVE NW	Amount of Each Disbursement this Period 225.00
	City WASHINGTON State DC Zip Code 20002	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
ARNOLD ENGRAVERS

Mailing Address 1625 K ST NW

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21-0.019990
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	1	0

Amount of Each Disbursement this Period

26.50

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
AT&T MOBILITY

Mailing Address PO BOX 6463

City CAROL STREAM State IL Zip Code 60197-6463

Purpose of Disbursement
PHONE SVC

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21-0.019992
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	1	0

Amount of Each Disbursement this Period

1256.46

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
B SMITHS RESTAURANT

Mailing Address 1120 AVE OF THE AMERICAS

City NEW YORK State NY Zip Code 10036

Purpose of Disbursement
CATERING

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21-0.019996
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	1	0

Amount of Each Disbursement this Period

4285.02

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) BOSTON COACH COMPANY</p> <p>Mailing Address 70 FARGO ST 8TH FLOOR</p> <p>City BOSTON State MA Zip Code 02210</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020005</p> <p>Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 366.24</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) CARMINES DC</p> <p>Mailing Address 425 7TH ST NW</p> <p>City WASHINGTON State DC Zip Code 20004</p> <p>Purpose of Disbursement CATERING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020011</p> <p>Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 750.00</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) CHEAPTICKETS.COM</p> <p>Mailing Address 200 S WACKER DR UNIT 1900</p> <p>City CHICAGO State IL Zip Code 60606</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020029</p> <p>Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 6.99</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
CONTINENTAL AIRLINES

Mailing Address PO BOX 4658

City HOUSTON State TX Zip Code 77210-4658

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB21-0.020138
Date of Disbursement 10 / 14 / 2010

Amount of Each Disbursement this Period 563.20

Category/Type

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
CONTINENTAL AIRLINES

Mailing Address PO BOX 4658

City HOUSTON State TX Zip Code 77210-4658

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB21-0.020140
Date of Disbursement 10 / 14 / 2010

Amount of Each Disbursement this Period 563.20

Category/Type

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
CROWN PLAZA HOTELS

Mailing Address PO BOX 30321

City SALT LAKE CITY State UT Zip Code 84130

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB21-0.020038
Date of Disbursement 10 / 14 / 2010

Amount of Each Disbursement this Period 160.44

Category/Type

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ► 0.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) CROWN PLAZA HOTELS</p> <p>Mailing Address PO BOX 30321</p> <p>City SALT LAKE CITY State UT Zip Code 84130</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020040</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="160.44"/></p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) DELTA AIRLINES INC</p> <p>Mailing Address PO BOX 20706</p> <p>City ATLANTA State GA Zip Code 30320</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020124</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="464.80"/></p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) DELTA AIRLINES INC</p> <p>Mailing Address PO BOX 20706</p> <p>City ATLANTA State GA Zip Code 30320</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020126</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="382.80"/></p> <p>[MEMO ITEM]</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="0.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) DELTA AIRLINES INC</p> <p>Mailing Address PO BOX 20706</p> <p>City ATLANTA State GA Zip Code 30320</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020128</p> <p>Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 474.30</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) DELTA AIRLINES INC</p> <p>Mailing Address PO BOX 20706</p> <p>City ATLANTA State GA Zip Code 30320</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020130</p> <p>Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 952.40</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) DELTA AIRLINES INC</p> <p>Mailing Address PO BOX 20706</p> <p>City ATLANTA State GA Zip Code 30320</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020132</p> <p>Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 952.40</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DELTA AIRLINES INC	Transaction ID: SB21-0.020134
	Mailing Address PO BOX 20706	Date of Disbursement 10 / 14 / 2010
	City ATLANTA State GA Zip Code 30320	Amount of Each Disbursement this Period 1224.10
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) DELTA AIRLINES INC	Transaction ID: SB21-0.020136
	Mailing Address PO BOX 20706	Date of Disbursement 10 / 14 / 2010
	City ATLANTA State GA Zip Code 30320	Amount of Each Disbursement this Period 1421.30
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) EAGLE PROMOTIONS	Transaction ID: SB21-0.020044
	Mailing Address 4575 W POST RD STE 100	Date of Disbursement 10 / 14 / 2010
	City LAS VEGAS State NV Zip Code 89118	Amount of Each Disbursement this Period 961.40
	Purpose of Disbursement PRINTING	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) EDWARD MARC	Transaction ID: SB21-0.020048 Date of Disbursement
	Mailing Address 1705 EAST CARSON STREET	<input type="text" value="10"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City PITTSBURGH State PA Zip Code 15203	Amount of Each Disbursement this Period
	Purpose of Disbursement FOOD	<input type="text" value="27.06"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) FACEBOOK	Transaction ID: SB21-0.020046 Date of Disbursement
	Mailing Address 1601 S CALIFORNIA AVE	<input type="text" value="10"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City PALO ALTO State CA Zip Code 94304	Amount of Each Disbursement this Period
	Purpose of Disbursement WEB SERVICE	<input type="text" value="302.69"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) FAIRFIELD INN	Transaction ID: SB21-0.020052 Date of Disbursement
	Mailing Address 10400 FERNWOOD ROAD	<input type="text" value="10"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City BETHESDA State MD Zip Code 20817	Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL	<input type="text" value="124.26"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) FEDEX KINKOS	Transaction ID: SB21-0.020054 Date of Disbursement
	Mailing Address PO BOX 672085	<input type="text" value="10"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City DALLAS State TX Zip Code 75267-2085	Amount of Each Disbursement this Period
	Purpose of Disbursement DELIVERY	<input type="text" value="96.71"/>
	Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) FIREHOOK BAKERY	Transaction ID: SB21-0.020051 Date of Disbursement
	Mailing Address 215 PENNSYLVANIA AVE SE	<input type="text" value="10"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20004	Amount of Each Disbursement this Period
	Purpose of Disbursement FOOD/BEVERAGE	<input type="text" value="46.31"/>
	Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) FIREHOOK BAKERY	Transaction ID: SB21-0.020056 Date of Disbursement
	Mailing Address 215 PENNSYLVANIA AVE SE	<input type="text" value="10"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20004	Amount of Each Disbursement this Period
	Purpose of Disbursement FOOD/BEVERAGE	<input type="text" value="43.82"/>
	Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) GOOGLE INC	Transaction ID: SB21-0.020059 Date of Disbursement 10 / 14 / 2010
	Mailing Address 1101 NEW YORK AVE NW SECOND FLOOR	Amount of Each Disbursement this Period 8691.97
	City WASHINGTON State DC Zip Code 20005	
	Purpose of Disbursement WEB SERVICE Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) HASLER FINANCIAL SERVICES	Transaction ID: SB21-0.020063 Date of Disbursement 10 / 14 / 2010
	Mailing Address PO BOX 45850	Amount of Each Disbursement this Period 192.83
	City SAN FRANCISCO State CA Zip Code 94145	
	Purpose of Disbursement POSTAGE Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) HOTEL SOLAMAR	Transaction ID: SB21-0.020065 Date of Disbursement 10 / 14 / 2010
	Mailing Address 435 6TH AVENUE	Amount of Each Disbursement this Period 3126.68
	City SAN DIEGO State CA Zip Code 92101	
	Purpose of Disbursement FACILITY RENTAL/CATERING Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 2821 / 3187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) HYATT HOTELS	Transaction ID: SB21-0.020068 Date of Disbursement 10 / 14 / 2010
	Mailing Address 71 S WACKER DR 16TH FLOOR	Amount of Each Disbursement this Period 203.02
	City CHICAGO State IL Zip Code 60606	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) LEXIS-NEXIS	Transaction ID: SB21-0.020070 Date of Disbursement 10 / 14 / 2010
	Mailing Address PO BOX 7247-7090	Amount of Each Disbursement this Period 16219.05
	City PHILADELPHIA State PA Zip Code 19170-7090	
	Purpose of Disbursement SUBSCRIPTIONS	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) LOVELESS CAFE	Transaction ID: SB21-0.020072 Date of Disbursement 10 / 14 / 2010
	Mailing Address 8400 TENNESSEE 100	Amount of Each Disbursement this Period 3366.86
	City NASHVILLE State TN Zip Code 37221	
	Purpose of Disbursement CATERING	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MARRIOTT HOTELS</p> <p>Mailing Address 10400 FERNWOOD RD</p> <p>City BETHESDA State MD Zip Code 20817</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020074 Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 220.75</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) MCCORMICK AND SCHMICK</p> <p>Mailing Address 1414 NW NORTHUP ST STE 700</p> <p>City PORTLAND State OR Zip Code 97209</p> <p>Purpose of Disbursement CATERING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020076 Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 1219.81</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) NATIONAL BUILDING MUSEUM</p> <p>Mailing Address 401 F STREET NW</p> <p>City WASHINGTON State DC Zip Code 20001</p> <p>Purpose of Disbursement FACILITY RENTAL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020078 Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ORBITZ DOT COM	Transaction ID: SB21-0.020080 Date of Disbursement
	Mailing Address 500 W MADISON	<input type="text" value="10"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City CHICAGO State IL Zip Code 60661	Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL	<input type="text" value="538.23"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) PALMERS DELI AND MARKET	Transaction ID: SB21-0.020082 Date of Disbursement
	Mailing Address 4949 WESTOWN PKWY UNIT 180	<input type="text" value="10"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WEST DES MOINES State IA Zip Code 50266	Amount of Each Disbursement this Period
	Purpose of Disbursement CATERING	<input type="text" value="1172.36"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) PANERA BREAD CO	Transaction ID: SB21-0.020084 Date of Disbursement
	Mailing Address 3630 S GEYER RD	<input type="text" value="10"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City ST LOUIS State MO Zip Code 63127	Amount of Each Disbursement this Period
	Purpose of Disbursement FOOD/BEVERAGE	<input type="text" value="369.17"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) PAYPAL INC	Transaction ID: SB21-0.020086 Date of Disbursement 10 / 14 / 2010
	Mailing Address 2211 N 1ST ST	Amount of Each Disbursement this Period 59.95
	City SAN JOSE State CA Zip Code 95131	
	Purpose of Disbursement BANK FEES Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) PLAQUE MAKER DOT COM	Transaction ID: SB21-0.020088 Date of Disbursement 10 / 14 / 2010
	Mailing Address 289 BUSINESS PARK DR	Amount of Each Disbursement this Period 784.00
	City FORTVILLE State IN Zip Code 46040	
	Purpose of Disbursement OFFICE SUPPLIES Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) PREMIERE GLOBAL SERVICES	Transaction ID: SB21-0.020090 Date of Disbursement 10 / 14 / 2010
	Mailing Address 3280 PEACHTREE RD NW STE 1000	Amount of Each Disbursement this Period 3007.68
	City ATLANTA State GA Zip Code 30305	
	Purpose of Disbursement PHONE SVC Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
STAPLES CREDIT PLAN

Mailing Address 8725 W SAHARA

City LAS VEGAS State NV Zip Code 89163

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB21-0.020092
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
THE GREENBRIER

Mailing Address 300 W MAIN ST

City WHITE SULFUR State WV Zip Code 24986

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB21-0.020061
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
THE MUSIC BAKERY

Mailing Address 7522 CAMPBELL RD
STE 113

City DALLAS State TX Zip Code 75248

Purpose of Disbursement AUDIO/VISUAL SVC

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB21-0.020094
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) UPS</p> <p>Mailing Address PO BOX 7247-0244</p> <p>City PHILADELPHIA State PA Zip Code 19170-0001</p> <p>Purpose of Disbursement DELIVERY</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020104</p> <p>Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 1168.27</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) US AIRWAYS</p> <p>Mailing Address 2345 CRYSTAL DR</p> <p>City ARLINGTON State VA Zip Code 22227</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020106</p> <p>Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 449.90</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) US POSTMASTER</p> <p>Mailing Address 900 BRENTWOOD ROAD NE</p> <p>City WASHINGTON State DC Zip Code 20018-1004</p> <p>Purpose of Disbursement POSTAGE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020108</p> <p>Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 44.00</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) US POSTMASTER	Transaction ID: SB21-0.020110 Date of Disbursement 10 / 14 / 2010
	Mailing Address 900 BRENTWOOD ROAD NE	Amount of Each Disbursement this Period 142.10
	City WASHINGTON State DC Zip Code 20018-1004	
	Purpose of Disbursement POSTAGE	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) VERIZON	Transaction ID: SB21-0.020114 Date of Disbursement 10 / 14 / 2010
	Mailing Address PO BOX 660720	Amount of Each Disbursement this Period 60.60
	City DALLAS State TX Zip Code 75266-0720	
	Purpose of Disbursement PHONE SVC	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) VERIZON	Transaction ID: SB21-0.020116 Date of Disbursement 10 / 14 / 2010
	Mailing Address PO BOX 660720	Amount of Each Disbursement this Period 3041.07
	City DALLAS State TX Zip Code 75266-0720	
	Purpose of Disbursement PHONE SVC	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) VERIZON BUSINESS</p> <p>Mailing Address PO BOX 371392</p> <p>City PITTSBURGH State PA Zip Code 15250-7392</p> <p>Purpose of Disbursement PHONE SVC</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020112</p> <p>Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 4300.34</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) VERIZON WIRELESS</p> <p>Mailing Address PO BOX 17464</p> <p>City BALTIMORE State MD Zip Code 21297-1464</p> <p>Purpose of Disbursement PHONE SVC</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020118</p> <p>Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 8227.86</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) WASHINGTON METRO AREA TRANSIT AUTHORITY</p> <p>Mailing Address 600 5TH ST NW</p> <p>City WASHINGTON State DC Zip Code 20001</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020122</p> <p>Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 3505.00</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) 1800FLOWERS.COM	Transaction ID: SB21-0.019959 Date of Disbursement 10 / 14 / 2010
	Mailing Address 1 OLD COUNTRY RD STE 500	Amount of Each Disbursement this Period 64.98
	City CARLE PLACE State NY Zip Code 11514	
	Purpose of Disbursement FLORAL EXPENSE	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) 37 SIGNALS DOT COM	Transaction ID: SB21-0.020371 Date of Disbursement 11 / 03 / 2010
	Mailing Address 400 N MAY ST #301	Amount of Each Disbursement this Period 24.00
	City CHICAGO State IL Zip Code 60622	
	Purpose of Disbursement WEB SERVICE	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) AMAZON.COM	Transaction ID: SB21-0.020373 Date of Disbursement 11 / 03 / 2010
	Mailing Address 1200 12TH AVE	Amount of Each Disbursement this Period 769.29
	City SEATTLE State WA Zip Code 98144	
	Purpose of Disbursement OFFICE SUPPLIES	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) AMERICAN AIRLINES</p> <p>Mailing Address PO BOX 620081</p> <p>City DALLAS State TX Zip Code 75262</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020375</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="222.40"/></p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) AMERICAN AIRLINES</p> <p>Mailing Address PO BOX 620081</p> <p>City DALLAS State TX Zip Code 75262</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020377</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1254.40"/></p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) AMERICAN AIRLINES</p> <p>Mailing Address PO BOX 620081</p> <p>City DALLAS State TX Zip Code 75262</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020379</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="198.70"/></p> <p>[MEMO ITEM]</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="0.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) AMERICAN AIRLINES	Transaction ID: SB21-0.020381 Date of Disbursement 11 / 03 / 2010
	Mailing Address PO BOX 620081	Amount of Each Disbursement this Period 341.40
	City DALLAS State TX Zip Code 75262	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) AMERICAN AIRLINES	Transaction ID: SB21-0.020383 Date of Disbursement 11 / 03 / 2010
	Mailing Address PO BOX 620081	Amount of Each Disbursement this Period 446.69
	City DALLAS State TX Zip Code 75262	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) AMERICAN AIRLINES	Transaction ID: SB21-0.020385 Date of Disbursement 11 / 03 / 2010
	Mailing Address PO BOX 620081	Amount of Each Disbursement this Period 341.70
	City DALLAS State TX Zip Code 75262	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) AMERICAN AIRLINES</p> <p>Mailing Address PO BOX 620081</p> <p>City DALLAS State TX Zip Code 75262</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020585 Date of Disbursement 11 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 436.69</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) AMTRAK</p> <p>Mailing Address 60 MASSACHUSETTS AVE NW</p> <p>City WASHINGTON State DC Zip Code 20002</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020387 Date of Disbursement 11 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 43.00</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) AMTRAK</p> <p>Mailing Address 60 MASSACHUSETTS AVE NW</p> <p>City WASHINGTON State DC Zip Code 20002</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020389 Date of Disbursement 11 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 203.00</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CARMINES DC	Transaction ID: SB21-0.020395 Date of Disbursement 11 / 03 / 2010
	Mailing Address 425 7TH ST NW	Amount of Each Disbursement this Period 2957.28
	City WASHINGTON State DC Zip Code 20004	
	Purpose of Disbursement CATERING	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) COLONIAL PARKING	Transaction ID: SB21-0.020399 Date of Disbursement 11 / 03 / 2010
	Mailing Address 1050 THOMAS JEFFERSON ST NW STE 100	Amount of Each Disbursement this Period 18.00
	City WASHINGTON State DC Zip Code 20007	
	Purpose of Disbursement PARKING SVC	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) CONGRESSIONAL QUARTERLY INC	Transaction ID: SB21-0.020397 Date of Disbursement 11 / 03 / 2010
	Mailing Address 1255 22ND ST NW STE 700	Amount of Each Disbursement this Period 23675.93
	City WASHINGTON State DC Zip Code 20037	
	Purpose of Disbursement SUBSCRIPTIONS	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CONTINENTAL AIRLINES	Transaction ID: SB21-0.020401 Date of Disbursement
	Mailing Address PO BOX 4658	<input type="text" value="11"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City HOUSTON State TX Zip Code 77210-4658	Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL	<input type="text" value="217.40"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) CONTINENTAL AIRLINES	Transaction ID: SB21-0.020403 Date of Disbursement
	Mailing Address PO BOX 4658	<input type="text" value="11"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City HOUSTON State TX Zip Code 77210-4658	Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL	<input type="text" value="217.40"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) DELTA AIRLINES INC	Transaction ID: SB21-0.020407 Date of Disbursement
	Mailing Address PO BOX 20706	<input type="text" value="11"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City ATLANTA State GA Zip Code 30320	Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL	<input type="text" value="334.90"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) DELTA AIRLINES INC</p> <p>Mailing Address PO BOX 20706</p> <p>City ATLANTA State GA Zip Code 30320</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020409</p> <p>Date of Disbursement 11 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 298.70</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) DELTA AIRLINES INC</p> <p>Mailing Address PO BOX 20706</p> <p>City ATLANTA State GA Zip Code 30320</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020411</p> <p>Date of Disbursement 11 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 685.40</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) DELTA AIRLINES INC</p> <p>Mailing Address PO BOX 20706</p> <p>City ATLANTA State GA Zip Code 30320</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020413</p> <p>Date of Disbursement 11 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 298.70</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DELTA AIRLINES INC	Transaction ID: SB21-0.020415 Date of Disbursement 11 / 03 / 2010
	Mailing Address PO BOX 20706	Amount of Each Disbursement this Period 481.70
	City ATLANTA State GA Zip Code 30320	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) DELTA AIRLINES INC	Transaction ID: SB21-0.020417 Date of Disbursement 11 / 03 / 2010
	Mailing Address PO BOX 20706	Amount of Each Disbursement this Period 481.70
	City ATLANTA State GA Zip Code 30320	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) DELTA AIRLINES INC	Transaction ID: SB21-0.020419 Date of Disbursement 11 / 03 / 2010
	Mailing Address PO BOX 20706	Amount of Each Disbursement this Period 481.70
	City ATLANTA State GA Zip Code 30320	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DELTA AIRLINES INC <hr/> Mailing Address PO BOX 20706 <hr/> City ATLANTA State GA Zip Code 30320 <hr/> Purpose of Disbursement TRAVEL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.020421 Date of Disbursement 11 / 03 / 2010	Amount of Each Disbursement this Period 586.70 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) DELTA AIRLINES INC <hr/> Mailing Address PO BOX 20706 <hr/> City ATLANTA State GA Zip Code 30320 <hr/> Purpose of Disbursement TRAVEL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.020423 Date of Disbursement 11 / 03 / 2010	Amount of Each Disbursement this Period 586.70 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) DELTA AIRLINES INC <hr/> Mailing Address PO BOX 20706 <hr/> City ATLANTA State GA Zip Code 30320 <hr/> Purpose of Disbursement TRAVEL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.020425 Date of Disbursement 11 / 03 / 2010	Amount of Each Disbursement this Period 586.70 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DELTA AIRLINES INC	Transaction ID: SB21-0.020427 Date of Disbursement 11 / 03 / 2010
	Mailing Address PO BOX 20706	Amount of Each Disbursement this Period 421.70
	City ATLANTA State GA Zip Code 30320	
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) DELTA AIRLINES INC	Transaction ID: SB21-0.020429 Date of Disbursement 11 / 03 / 2010
	Mailing Address PO BOX 20706	Amount of Each Disbursement this Period 421.70
	City ATLANTA State GA Zip Code 30320	
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) FACEBOOK	Transaction ID: SB21-0.020431 Date of Disbursement 11 / 03 / 2010
	Mailing Address 1601 S CALIFORNIA AVE	Amount of Each Disbursement this Period 30.00
	City PALO ALTO State CA Zip Code 94304	
	Purpose of Disbursement WEB SERVICE	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) FACEBOOK	Transaction ID: SB21-0.020433 Date of Disbursement 11 / 03 / 2010
	Mailing Address 1601 S CALIFORNIA AVE	Amount of Each Disbursement this Period 30.00
	City PALO ALTO State CA Zip Code 94304	
	Purpose of Disbursement WEB SERVICE Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) FACEBOOK	Transaction ID: SB21-0.020435 Date of Disbursement 11 / 03 / 2010
	Mailing Address 1601 S CALIFORNIA AVE	Amount of Each Disbursement this Period 30.00
	City PALO ALTO State CA Zip Code 94304	
	Purpose of Disbursement WEB SERVICE Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) FACEBOOK	Transaction ID: SB21-0.020437 Date of Disbursement 11 / 03 / 2010
	Mailing Address 1601 S CALIFORNIA AVE	Amount of Each Disbursement this Period 30.00
	City PALO ALTO State CA Zip Code 94304	
	Purpose of Disbursement WEB SERVICE Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) FACEBOOK	Transaction ID: SB21-0.020439 Date of Disbursement
	Mailing Address 1601 S CALIFORNIA AVE	<input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>
	City PALO ALTO State CA Zip Code 94304	Amount of Each Disbursement this Period
	Purpose of Disbursement WEB SERVICE	<input type="text" value="30.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) FACEBOOK	Transaction ID: SB21-0.020441 Date of Disbursement
	Mailing Address 1601 S CALIFORNIA AVE	<input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>
	City PALO ALTO State CA Zip Code 94304	Amount of Each Disbursement this Period
	Purpose of Disbursement WEB SERVICE	<input type="text" value="30.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) FACEBOOK	Transaction ID: SB21-0.020443 Date of Disbursement
	Mailing Address 1601 S CALIFORNIA AVE	<input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>
	City PALO ALTO State CA Zip Code 94304	Amount of Each Disbursement this Period
	Purpose of Disbursement WEB SERVICE	<input type="text" value="29.58"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) FACEBOOK	Transaction ID: SB21-0.020445 Date of Disbursement 11 / 03 / 2010
	Mailing Address 1601 S CALIFORNIA AVE	Amount of Each Disbursement this Period 30.00
	City PALO ALTO State CA Zip Code 94304	
	Purpose of Disbursement WEB SERVICE	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) FACEBOOK	Transaction ID: SB21-0.020447 Date of Disbursement 11 / 03 / 2010
	Mailing Address 1601 S CALIFORNIA AVE	Amount of Each Disbursement this Period 30.00
	City PALO ALTO State CA Zip Code 94304	
	Purpose of Disbursement WEB SERVICE	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) FACEBOOK	Transaction ID: SB21-0.020587 Date of Disbursement 11 / 03 / 2010
	Mailing Address 1601 S CALIFORNIA AVE	Amount of Each Disbursement this Period 30.00
	City PALO ALTO State CA Zip Code 94304	
	Purpose of Disbursement WEB SERVICE	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) FAIRMONT HOTELS	Transaction ID: SB21-0.020533 Date of Disbursement
	Mailing Address 950 MASON ST	<input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>
	City SAN FRANCISCO State CA Zip Code 94108	Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL	<input type="text" value="368.94"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) FAIRMONT HOTELS	Transaction ID: SB21-0.020535 Date of Disbursement
	Mailing Address 950 MASON ST	<input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>
	City SAN FRANCISCO State CA Zip Code 94108	Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL	<input type="text" value="396.98"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) FAIRMONT HOTELS	Transaction ID: SB21-0.020537 Date of Disbursement
	Mailing Address 950 MASON ST	<input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>
	City SAN FRANCISCO State CA Zip Code 94108	Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL	<input type="text" value="368.94"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) FEDEX Mailing Address PO BOX 371461 City PITTSBURGH State PA Zip Code 15250-7461 Purpose of Disbursement DELIVERY Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.020449 Date of Disbursement 11 / 03 / 2010
	Amount of Each Disbursement this Period 27.43
	[MEMO ITEM]
	Category/ Type
B. Full Name (Last, First, Middle Initial) FEDEX Mailing Address PO BOX 371461 City PITTSBURGH State PA Zip Code 15250-7461 Purpose of Disbursement DELIVERY Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.020451 Date of Disbursement 11 / 03 / 2010
	Amount of Each Disbursement this Period 69.01
	[MEMO ITEM]
	Category/ Type
C. Full Name (Last, First, Middle Initial) FIREHOOK BAKERY Mailing Address 215 PENNSYLVANIA AVE SE City WASHINGTON State DC Zip Code 20004 Purpose of Disbursement FOOD/BEVERAGE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.020453 Date of Disbursement 11 / 03 / 2010
	Amount of Each Disbursement this Period 44.50
	[MEMO ITEM]
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) FRONTIER AIRLINES	Transaction ID: SB21-0.020461 Date of Disbursement																			
	Mailing Address 8909 PURDUE RD, STE 300	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	3		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	3		2	0	1	0												
	City INDIANAPOLIS State IN Zip Code 46268	Amount of Each Disbursement this Period																			
	Purpose of Disbursement TRAVEL	<table border="1"><tr><td>331.80</td></tr></table>	331.80																		
331.80																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:	[MEMO ITEM]																			

B.	Full Name (Last, First, Middle Initial) FRONTIER AIRLINES	Transaction ID: SB21-0.020463 Date of Disbursement																			
	Mailing Address 8909 PURDUE RD, STE 300	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	3		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	3		2	0	1	0												
	City INDIANAPOLIS State IN Zip Code 46268	Amount of Each Disbursement this Period																			
	Purpose of Disbursement TRAVEL	<table border="1"><tr><td>334.80</td></tr></table>	334.80																		
334.80																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:	[MEMO ITEM]																			

C.	Full Name (Last, First, Middle Initial) FRONTIER AIRLINES	Transaction ID: SB21-0.020465 Date of Disbursement																			
	Mailing Address 8909 PURDUE RD, STE 300	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	3		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	3		2	0	1	0												
	City INDIANAPOLIS State IN Zip Code 46268	Amount of Each Disbursement this Period																			
	Purpose of Disbursement TRAVEL	<table border="1"><tr><td>334.80</td></tr></table>	334.80																		
334.80																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:	[MEMO ITEM]																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) FRONTIER AIRLINES	Transaction ID: SB21-0.020467 Date of Disbursement																			
	Mailing Address 8909 PURDUE RD, STE 300	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>0</td><td>3</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	3	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	0	3	/	2	0	1	0												
	City INDIANAPOLIS State IN Zip Code 46268	Amount of Each Disbursement this Period																			
	Purpose of Disbursement TRAVEL	<table border="1"><tr><td>389.80</td></tr></table>	389.80																		
389.80																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) FRONTIER AIRLINES	Transaction ID: SB21-0.020469 Date of Disbursement																			
	Mailing Address 8909 PURDUE RD, STE 300	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>0</td><td>3</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	3	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	0	3	/	2	0	1	0												
	City INDIANAPOLIS State IN Zip Code 46268	Amount of Each Disbursement this Period																			
	Purpose of Disbursement TRAVEL	<table border="1"><tr><td>440.80</td></tr></table>	440.80																		
440.80																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) FRONTIER AIRLINES	Transaction ID: SB21-0.020471 Date of Disbursement																			
	Mailing Address 8909 PURDUE RD, STE 300	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>0</td><td>3</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	3	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	0	3	/	2	0	1	0												
	City INDIANAPOLIS State IN Zip Code 46268	Amount of Each Disbursement this Period																			
	Purpose of Disbursement TRAVEL	<table border="1"><tr><td>440.80</td></tr></table>	440.80																		
440.80																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) FRONTIER AIRLINES	Transaction ID: SB21-0.020473 Date of Disbursement
	Mailing Address 8909 PURDUE RD, STE 300	<input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>
	City INDIANAPOLIS State IN Zip Code 46268	Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL	<input type="text" value="440.80"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) FRONTIER AIRLINES	Transaction ID: SB21-0.020475 Date of Disbursement
	Mailing Address 8909 PURDUE RD, STE 300	<input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>
	City INDIANAPOLIS State IN Zip Code 46268	Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL	<input type="text" value="440.80"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) GOOGLE INC	Transaction ID: SB21-0.020479 Date of Disbursement
	Mailing Address 1101 NEW YORK AVE NW SECOND FLOOR	<input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement WEB SERVICE	<input type="text" value="8125.53"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) GROW WITH US FLORIST	Transaction ID: SB21-0.020481 Date of Disbursement
	Mailing Address 106 METAIRIE HEIGHTS AVE	<input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>
	City METAIRIE State LA Zip Code 70001	Amount of Each Disbursement this Period
	Purpose of Disbursement FLORAL EXPENSE	<input type="text" value="76.13"/>
	Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) HASLER FINANCIAL SERVICES	Transaction ID: SB21-0.020483 Date of Disbursement
	Mailing Address PO BOX 45850	<input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>
	City SAN FRANCISCO State CA Zip Code 94145	Amount of Each Disbursement this Period
	Purpose of Disbursement POSTAGE	<input type="text" value="192.83"/>
	Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) HILTON GARDEN INN	Transaction ID: SB21-0.020485 Date of Disbursement
	Mailing Address 755 CROSSOVER LN	<input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>
	City MEMPHIS State TN Zip Code 38117	Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL	<input type="text" value="157.79"/>
	Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) HILTON GARDEN INN <hr/> Mailing Address 755 CROSSOVER LN <hr/> City MEMPHIS State TN Zip Code 38117 <hr/> Purpose of Disbursement TRAVEL Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21-0.020487 Date of Disbursement 11 / 03 / 2010 <hr/> Amount of Each Disbursement this Period 157.79 <hr/> [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) HILTON GARDEN INN <hr/> Mailing Address 755 CROSSOVER LN <hr/> City MEMPHIS State TN Zip Code 38117 <hr/> Purpose of Disbursement TRAVEL Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21-0.020489 Date of Disbursement 11 / 03 / 2010 <hr/> Amount of Each Disbursement this Period 121.54 <hr/> [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) HILTON GARDEN INN <hr/> Mailing Address 755 CROSSOVER LN <hr/> City MEMPHIS State TN Zip Code 38117 <hr/> Purpose of Disbursement TRAVEL Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21-0.020491 Date of Disbursement 11 / 03 / 2010 <hr/> Amount of Each Disbursement this Period 438.44 <hr/> [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) HILTON HOTELS CORP	Transaction ID: SB21-0.020493 Date of Disbursement 11 / 03 / 2010
	Mailing Address 7930 JONES BRANCH DR, STE 1100	Amount of Each Disbursement this Period 201.82
	City MCLEAN State VA Zip Code 22102	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) HOLIDAY INN HOTELS	Transaction ID: SB21-0.020575 Date of Disbursement 11 / 03 / 2010
	Mailing Address 3 RAVINIA DR STE 100	Amount of Each Disbursement this Period 294.12
	City ATLANTA State GA Zip Code 30346-2149	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) INTER MARKETS INC	Transaction ID: SB21-0.020495 Date of Disbursement 11 / 03 / 2010
	Mailing Address 344 MAPLE AVE WEST STE 318	Amount of Each Disbursement this Period 5000.00
	City VIENNA State VA Zip Code 22180	
	Purpose of Disbursement WEB SERVICE	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) JETBLUE AIRWAYS	Transaction ID: SB21-0.020497 Date of Disbursement 11 / 03 / 2010
	Mailing Address 11829 QUEENS BLVD	Amount of Each Disbursement this Period 714.70
	City FLUSHING State NY Zip Code 11375	
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) JUBANS RESTAURANT	Transaction ID: SB21-0.020499 Date of Disbursement 11 / 03 / 2010
	Mailing Address 3739 PERKINS RD	Amount of Each Disbursement this Period 928.70
	City BATON ROUGE State LA Zip Code 70808	
	Purpose of Disbursement CATERING	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) LEXIS-NEXIS	Transaction ID: SB21-0.020501 Date of Disbursement 11 / 03 / 2010
	Mailing Address PO BOX 7247-7090	Amount of Each Disbursement this Period 16219.06
	City PHILADELPHIA State PA Zip Code 19170-7090	
	Purpose of Disbursement SUBSCRIPTIONS	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) LOEWS HOTELS	Transaction ID: SB21-0.020503 Date of Disbursement 11 / 03 / 2010
	Mailing Address 667 MADISON AVE	Amount of Each Disbursement this Period 2394.45
	City NEW YORK State NY Zip Code 10065	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) MAIL CHIMP	Transaction ID: SB21-0.020505 Date of Disbursement 11 / 03 / 2010
	Mailing Address 512 MEANS ST STE 404	Amount of Each Disbursement this Period 150.00
	City ATLANTA State GA Zip Code 30318	
	Purpose of Disbursement WEB SERVICE	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) MANDARIN ORIENTAL HOTELS	Transaction ID: SB21-0.020507 Date of Disbursement 11 / 03 / 2010
	Mailing Address 1330 MARYLAND AVE SW	Amount of Each Disbursement this Period 4950.00
	City WASHINGTON State DC Zip Code 20024	
	Purpose of Disbursement FACILITY RENTAL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) MARRIOTT GROUP</p> <p>Mailing Address 211 NORTH UNION ST SUITE 220</p> <p>City ALEXANDRIA State VA Zip Code 22314</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020405</p> <p>Date of Disbursement 11 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 124.26</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) OCEAN AVENUE SEAFOOD</p> <p>Mailing Address 1401 OCEAN AVE</p> <p>City SANTA MONICA State CA Zip Code 90401</p> <p>Purpose of Disbursement CATERING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020509</p> <p>Date of Disbursement 11 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 452.26</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) OMEGA WORLD TRAVEL</p> <p>Mailing Address 115 BROADWAY STE 1506</p> <p>City NEW YORK State NY Zip Code 10006</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020539</p> <p>Date of Disbursement 11 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 160.00</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) PACER	Transaction ID: SB21-0.020511 Date of Disbursement 11 / 03 / 2010
	Mailing Address PO BOX 70951	Amount of Each Disbursement this Period 114.96
	City CHARLOTTE State NC Zip Code 28272	
	Purpose of Disbursement SUBSCRIPTIONS	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) PAYPAL INC	Transaction ID: SB21-0.020513 Date of Disbursement 11 / 03 / 2010
	Mailing Address 2211 N 1ST ST	Amount of Each Disbursement this Period 59.95
	City SAN JOSE State CA Zip Code 95131	
	Purpose of Disbursement BANK FEE	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) PERFORMABLE INC	Transaction ID: SB21-0.020515 Date of Disbursement 11 / 03 / 2010
	Mailing Address 21 WATER ST STE 305	Amount of Each Disbursement this Period 299.00
	City AMESBURY State MA Zip Code 01913	
	Purpose of Disbursement WEB SERVICE	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) PREMIERE GLOBAL SERVICES</p> <p>Mailing Address 3280 PEACHTREE RD NW STE 1000</p> <p>City ATLANTA State GA Zip Code 30305</p> <p>Purpose of Disbursement PHONE SVC</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020517 Date of Disbursement 11 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 4196.34</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) RASMUSSEN REPORTS</p> <p>Mailing Address 625 COOKMAN AVE STE 2</p> <p>City ASBURY PARK State NJ Zip Code 07712</p> <p>Purpose of Disbursement SUBSCRIPTIONS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020519 Date of Disbursement 11 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 19.95</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES</p> <p>Mailing Address 2702 LOVE FIELD DRIVE</p> <p>City DALLAS State TX Zip Code 75235</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020523 Date of Disbursement 11 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 325.40</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES	Transaction ID: SB21-0.020525
	Mailing Address 2702 LOVE FIELD DRIVE	Date of Disbursement MM / DD / YYYY 11 / 03 / 2010
	City DALLAS State TX Zip Code 75235	Amount of Each Disbursement this Period 515.10
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) STAPLES CREDIT PLAN	Transaction ID: SB21-0.020527
	Mailing Address 8725 W SAHARA	Date of Disbursement MM / DD / YYYY 11 / 03 / 2010
	City LAS VEGAS State NV Zip Code 89163	Amount of Each Disbursement this Period 84.74
	Purpose of Disbursement OFFICE SUPPLIES	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) STAPLES CREDIT PLAN	Transaction ID: SB21-0.020529
	Mailing Address 8725 W SAHARA	Date of Disbursement MM / DD / YYYY 11 / 03 / 2010
	City LAS VEGAS State NV Zip Code 89163	Amount of Each Disbursement this Period 52.79
	Purpose of Disbursement OFFICE SUPPLIES	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) STAPLES CREDIT PLAN</p> <p>Mailing Address 8725 W SAHARA</p> <p>City LAS VEGAS State NV Zip Code 89163</p> <p>Purpose of Disbursement OFFICE SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020531 Date of Disbursement 11 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 58.29</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) THE RITZ CARLTON HOTEL CO</p> <p>Mailing Address 4445 WILLARD AVE STE 800</p> <p>City CHEVY CHASE State MD Zip Code 20815</p> <p>Purpose of Disbursement FACILITY RENTAL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020521 Date of Disbursement 11 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) THE W HOTEL WASHINGTON DC</p> <p>Mailing Address 515 15TH ST NW</p> <p>City WASHINGTON State DC Zip Code 20004</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020571 Date of Disbursement 11 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 595.88</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) TORTILLA COAST</p> <p>Mailing Address 400 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement FOOD/BEVERAGE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020577</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="33.44"/></p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) TORTILLA COAST</p> <p>Mailing Address 400 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement FOOD/BEVERAGE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020579</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="136.50"/></p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) UNITED AIRLINES INC</p> <p>Mailing Address 77 W WACKER DR</p> <p>City CHICAGO State IL Zip Code 60601</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020541</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1153.10"/></p> <p>[MEMO ITEM]</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="0.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) UNITED AIRLINES INC <hr/> Mailing Address 77 W WACKER DR <hr/> City CHICAGO State IL Zip Code 60601 <hr/> Purpose of Disbursement TRAVEL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.020543 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 1 0
	Amount of Each Disbursement this Period 334.40
	[MEMO ITEM]
	Category/Type
B. Full Name (Last, First, Middle Initial) UNITED AIRLINES INC <hr/> Mailing Address 77 W WACKER DR <hr/> City CHICAGO State IL Zip Code 60601 <hr/> Purpose of Disbursement TRAVEL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.020545 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 1 0
	Amount of Each Disbursement this Period 49.70
	[MEMO ITEM]
	Category/Type
C. Full Name (Last, First, Middle Initial) UPS <hr/> Mailing Address PO BOX 7247-0244 <hr/> City PHILADELPHIA State PA Zip Code 19170-0001 <hr/> Purpose of Disbursement DELIVERY Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.020547 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 1 0
	Amount of Each Disbursement this Period 9496.65
	[MEMO ITEM]
	Category/Type

SUBTOTAL of Disbursements This Page (optional) ►

0.00

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) US AIRWAYS</p> <p>Mailing Address 2345 CRYSTAL DR</p> <p>City ARLINGTON State VA Zip Code 22227</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020551</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="420.40"/></p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) US AIRWAYS</p> <p>Mailing Address 2345 CRYSTAL DR</p> <p>City ARLINGTON State VA Zip Code 22227</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020553</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="510.70"/></p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) US AIRWAYS</p> <p>Mailing Address 2345 CRYSTAL DR</p> <p>City ARLINGTON State VA Zip Code 22227</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.020555</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="439.70"/></p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: SB21-0.020557 Date of Disbursement 11 / 03 / 2010
	Mailing Address 2345 CRYSTAL DR	Amount of Each Disbursement this Period 323.90
	City ARLINGTON State VA Zip Code 22227	
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: SB21-0.020559 Date of Disbursement 11 / 03 / 2010
	Mailing Address 2345 CRYSTAL DR	Amount of Each Disbursement this Period 273.90
	City ARLINGTON State VA Zip Code 22227	
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: SB21-0.020581 Date of Disbursement 11 / 03 / 2010
	Mailing Address 2345 CRYSTAL DR	Amount of Each Disbursement this Period 731.80
	City ARLINGTON State VA Zip Code 22227	
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: SB21-0.020583 Date of Disbursement 11 / 03 / 2010
	Mailing Address 2345 CRYSTAL DR	Amount of Each Disbursement this Period 25.00
	City ARLINGTON State VA Zip Code 22227	
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) US POSTMASTER	Transaction ID: SB21-0.020561 Date of Disbursement 11 / 03 / 2010
	Mailing Address 900 BRENTWOOD ROAD NE	Amount of Each Disbursement this Period 26.40
	City WASHINGTON State DC Zip Code 20018-1004	
	Purpose of Disbursement POSTAGE	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) VERIZON	Transaction ID: SB21-0.020565 Date of Disbursement 11 / 03 / 2010
	Mailing Address PO BOX 660720	Amount of Each Disbursement this Period 60.68
	City DALLAS State TX Zip Code 75266-0720	
	Purpose of Disbursement PHONE SVC	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) VERIZON	Transaction ID: SB21-0.020567 Date of Disbursement 11 / 03 / 2010
	Mailing Address PO BOX 660720	Amount of Each Disbursement this Period 3256.61
	City DALLAS State TX Zip Code 75266-0720	
	Purpose of Disbursement PHONE SVC Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) VERIZON BUSINESS	Transaction ID: SB21-0.020563 Date of Disbursement 11 / 03 / 2010
	Mailing Address PO BOX 371392	Amount of Each Disbursement this Period 4279.24
	City PITTSBURGH State PA Zip Code 15250-7392	
	Purpose of Disbursement PHONE SVC Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) VERIZON WIRELESS	Transaction ID: SB21-0.020569 Date of Disbursement 11 / 03 / 2010
	Mailing Address PO BOX 25505	Amount of Each Disbursement this Period 7969.64
	City LEHIGH VALLEY State PA Zip Code 18002-5505	
	Purpose of Disbursement PHONE SVC Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) WASHINGTON METRO AREA TRANSIT AUTHORITY Mailing Address 600 5TH ST NW City WASHINGTON State DC Zip Code 20001 Purpose of Disbursement TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21-0.020573 Date of Disbursement 11 / 03 / 2010
	Amount of Each Disbursement this Period 3098.50 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS MERCHANT ACCOUNT Mailing Address PO BOX 981532 City EL PASO State TX Zip Code 79998 Purpose of Disbursement BANK FEE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21-0.017288 Date of Disbursement 11 / 22 / 2010
	Amount of Each Disbursement this Period 639.54

C. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS MERCHANT ACCOUNT Mailing Address PO BOX 981532 City EL PASO State TX Zip Code 79998 Purpose of Disbursement BANK FEE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21-0.017292 Date of Disbursement 11 / 22 / 2010
	Amount of Each Disbursement this Period 3065.72

SUBTOTAL of Disbursements This Page (optional) ▶	3705.26
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS MERCHANT ACCOUNT</p> <p>Mailing Address PO BOX 981532</p> <p>City EL PASO State TX Zip Code 79998</p> <p>Purpose of Disbursement BANK FEE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.017299</p> <p>Date of Disbursement 11 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 20828.44</p>
<p>B. Full Name (Last, First, Middle Initial) AMERICAN VIEWPOINT INC</p> <p>Mailing Address 300 N LEE ST STE 400</p> <p>City ALEXANDRIA State VA Zip Code 22314</p> <p>Purpose of Disbursement SURVEY RESEARCH</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016487</p> <p>Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>C. Full Name (Last, First, Middle Initial) AMERICAN VIEWPOINT INC</p> <p>Mailing Address 300 N LEE ST STE 400</p> <p>City ALEXANDRIA State VA Zip Code 22314</p> <p>Purpose of Disbursement SURVEY RESEARCH</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016624</p> <p>Date of Disbursement 10 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 4075.00</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>29903.44</p>
<p>TOTAL This Period (last page this line number only)</p>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) AMERICAN VIEWPOINT INC	Transaction ID: SB21-0.016820 Date of Disbursement
	Mailing Address 300 N LEE ST STE 400	<input type="text" value="10"/> <input type="text" value="28"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement SURVEY RESEARCH	<input type="text" value="9075.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) AMERICAN VIEWPOINT INC	Transaction ID: SB21-0.016877 Date of Disbursement
	Mailing Address 300 N LEE ST STE 400	<input type="text" value="11"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement SURVEY RESEARCH	<input type="text" value="49075.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) AMERICOPY	Transaction ID: SB21-0.016447 Date of Disbursement
	Mailing Address 856 E MAIN STREET	<input type="text" value="10"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City MESA State AZ Zip Code 85203	Amount of Each Disbursement this Period
	Purpose of Disbursement PRINTING	<input type="text" value="1198.29"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="59348.29"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) ANTHEM MEDIA INC</p> <p>Mailing Address 5524 BEE CAVES RD STE B5</p> <p>City AUSTIN State TX Zip Code 78746</p> <p>Purpose of Disbursement MEDIA</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016878 Date of Disbursement 11 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 8000.00</p>
<p>B. Full Name (Last, First, Middle Initial) AUTOMATIC DATA PROCESSING</p> <p>Mailing Address PO BOX 9001006</p> <p>City LOUISVILLE State KY Zip Code 40290-1006</p> <p>Purpose of Disbursement PAYROLL SVC</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016485 Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 396.65</p>
<p>C. Full Name (Last, First, Middle Initial) AUTOMATIC DATA PROCESSING</p> <p>Mailing Address PO BOX 9001006</p> <p>City LOUISVILLE State KY Zip Code 40290-1006</p> <p>Purpose of Disbursement PAYROLL SVC</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016623 Date of Disbursement 10 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 270.13</p>

SUBTOTAL of Disbursements This Page (optional) ▶

8666.78

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) AVIS RENT A CAR SYSTEM INC	Transaction ID: SB21-0.017132
	Mailing Address 7876 COLLECTIONS CENTER DR	Date of Disbursement MM / DD / YYYY 11 / 18 / 2010
	City CHICAGO State IL Zip Code 60693	Amount of Each Disbursement this Period 254.67
	Purpose of Disbursement TRAVEL	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) AVITECTURE INC	Transaction ID: SB21-0.016821
	Mailing Address 1 EXPORT DR	Date of Disbursement MM / DD / YYYY 10 / 28 / 2010
	City STERLING State VA Zip Code 20164-4421	Amount of Each Disbursement this Period 678.40
	Purpose of Disbursement EQUIPMENT MAINTENANCE	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) AYRES MCHENRY AND ASSOCIATES	Transaction ID: SB21-0.016879
	Mailing Address 112 N ALFRED ST	Date of Disbursement MM / DD / YYYY 11 / 04 / 2010
	City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 30000.00
	Purpose of Disbursement SURVEY RESEARCH	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	30933.07
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) BARRY ZEPLOWITZ AND ASSOCIATES</p> <p>Mailing Address 901 KING STREET, S400</p> <p>City ALEXANDRIA State VA Zip Code 22314</p> <p>Purpose of Disbursement SURVEY RESEARCH</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016489</p> <p>Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 7000.00</p>
<p>B. Full Name (Last, First, Middle Initial) BARRY ZEPLOWITZ AND ASSOCIATES</p> <p>Mailing Address 901 KING STREET, S400</p> <p>City ALEXANDRIA State VA Zip Code 22314</p> <p>Purpose of Disbursement SURVEY RESEARCH</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016822</p> <p>Date of Disbursement 10 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p>C. Full Name (Last, First, Middle Initial) BASELICE AND ASSOCIATES INC</p> <p>Mailing Address 4131 SPICEWOOD SPRINGS RD STE O-2</p> <p>City AUSTIN State TX Zip Code 78759</p> <p>Purpose of Disbursement SURVEY RESEARCH</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016880</p> <p>Date of Disbursement 11 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 11500.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

20500.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) BLM STRATEGIES, LLC <hr/> Mailing Address 7707 WISCONSIN AVENUE, # 530 <hr/> City BETHESDA State MD Zip Code 20814 <hr/> Purpose of Disbursement FINANCE CONSULTING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016931 Date of Disbursement 11 / 09 / 2010
	Amount of Each Disbursement this Period 5000.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) BLUE SWARM <hr/> Mailing Address 70 BROADWAY STREET <hr/> City WESTFORD State MA Zip Code 01886 <hr/> Purpose of Disbursement FINANCE CONSULTING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016647 Date of Disbursement 10 / 21 / 2010
	Amount of Each Disbursement this Period 9251.66
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) BLUE SWARM <hr/> Mailing Address 70 BROADWAY STREET <hr/> City WESTFORD State MA Zip Code 01886 <hr/> Purpose of Disbursement FINANCE CONSULTING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017098 Date of Disbursement 11 / 18 / 2010
	Amount of Each Disbursement this Period 12339.47
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

26591.13

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) BURCH MUNFORD DIRECT	Transaction ID: SB21-0.016448 Date of Disbursement																			
	Mailing Address 901 N WASHINGTON ST, STE 300	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	4		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	4		2	0	1	0												
	City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period																			
	Purpose of Disbursement FINANCE CONSULTING	<table border="1"><tr><td>2246.42</td></tr></table>	2246.42																		
2246.42																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) BURCH MUNFORD DIRECT	Transaction ID: SB21-0.016945 Date of Disbursement																			
	Mailing Address 901 N WASHINGTON ST, STE 300	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	0		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	0		2	0	1	0												
	City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period																			
	Purpose of Disbursement FINANCE CONSULTING	<table border="1"><tr><td>159.00</td></tr></table>	159.00																		
159.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) CALL ASSISTANT	Transaction ID: SB21-0.017099 Date of Disbursement																			
	Mailing Address PO BOX 26864	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	8		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	8		2	0	1	0												
	City SALT LAKE CITY State UT Zip Code 84126	Amount of Each Disbursement this Period																			
	Purpose of Disbursement FUNDRAISING PHONE CALLS	<table border="1"><tr><td>12198.00</td></tr></table>	12198.00																		
12198.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>14603.42</td></tr></table>	14603.42
14603.42		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) CALVERT-JONES COMPANY Mailing Address 5703 EDSALL RD City ALEXANDRIA State VA Zip Code 22304 Purpose of Disbursement MAINTENANCE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016490 Date of Disbursement 10 / 14 / 2010
	Amount of Each Disbursement this Period 3000.00
B. Full Name (Last, First, Middle Initial) CAPITOL HILL CLUB Mailing Address 300 1ST ST SE City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement CATERING Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016449 Date of Disbursement 10 / 14 / 2010
	Amount of Each Disbursement this Period 4234.88
C. Full Name (Last, First, Middle Initial) CAPITOL HILL CLUB Mailing Address 300 1ST ST SE City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement CATERING/FACILITY RENTAL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016491 Date of Disbursement 10 / 14 / 2010
	Amount of Each Disbursement this Period 35347.48

SUBTOTAL of Disbursements This Page (optional) ▶	42582.36
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 2877 / 3187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) CAPITOL HILL CLUB <hr/> Mailing Address 300 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement CATERING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016648 Date of Disbursement 10 / 21 / 2010
	Amount of Each Disbursement this Period 3112.37
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) CAPITOL HILL CLUB <hr/> Mailing Address 300 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement CATERING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016946 Date of Disbursement 11 / 10 / 2010
	Amount of Each Disbursement this Period 2500.00
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) CAPITOL HILL CLUB <hr/> Mailing Address 300 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement FOOD/BEVERAGE Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017100 Date of Disbursement 11 / 18 / 2010
	Amount of Each Disbursement this Period 171.02
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

5783.39

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) CAPITOL HILL CLUB</p> <p>Mailing Address 300 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement CATERING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.017133</p> <p>Date of Disbursement 11 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 1225.99</p>
<p>B. Full Name (Last, First, Middle Initial) CAPITOL STRATEGY GROUP</p> <p>Mailing Address 2814 SPRING ROAD, STE 210</p> <p>City ATLANTA State GA Zip Code 30339</p> <p>Purpose of Disbursement FINANCE CONSULTING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016450</p> <p>Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 11843.39</p>
<p>C. Full Name (Last, First, Middle Initial) CAREFREE OFFICE TECHNOLOGY INC</p> <p>Mailing Address 10400 EATON PL STE 105</p> <p>City FAIRFAX State VA Zip Code 22030</p> <p>Purpose of Disbursement OFFICE SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016626</p> <p>Date of Disbursement 10 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 336.31</p>

SUBTOTAL of Disbursements This Page (optional) ▶

13405.69

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: SB21-0.016949 Date of Disbursement																			
	Mailing Address 7704 LEESBURG PIKE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	0	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	1	0	/	2	0	1	0												
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DATA PROCESSING SERVICES	<table border="1"><tr><td>30112.79</td></tr></table>	30112.79																		
30112.79																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: SB21-0.017101 Date of Disbursement																			
	Mailing Address 7704 LEESBURG PIKE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>1</td><td>8</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	8	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	1	8	/	2	0	1	0												
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DATA PROCESSING SERVICES	<table border="1"><tr><td>6980.97</td></tr></table>	6980.97																		
6980.97																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

C.	Full Name (Last, First, Middle Initial) COMMUNICATION CORP OF AMERICA	Transaction ID: SB21-0.017102 Date of Disbursement																			
	Mailing Address 13195 FREEDOM WAY	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>1</td><td>8</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	8	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	1	8	/	2	0	1	0												
	City BOSTON State VA Zip Code 22713	Amount of Each Disbursement this Period																			
	Purpose of Disbursement POSTAGE	<table border="1"><tr><td>54000.00</td></tr></table>	54000.00																		
54000.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>91093.76</td></tr></table>	91093.76
91093.76		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td> </td></tr></table>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) COMPTROLLER OF MARYLAND <hr/> Mailing Address STATE INCOME TAX BLDG <hr/> City ANNAPOLIS State MD Zip Code 21411 <hr/> Purpose of Disbursement PAYROLL TAXES Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21-0.016791 Date of Disbursement 10 / 22 / 2010 <hr/> Amount of Each Disbursement this Period 441.08
B.	Full Name (Last, First, Middle Initial) COMPTROLLER OF MARYLAND <hr/> Mailing Address STATE INCOME TAX BLDG <hr/> City ANNAPOLIS State MD Zip Code 21411 <hr/> Purpose of Disbursement PAYROLL TAXES Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21-0.017092 Date of Disbursement 11 / 05 / 2010 <hr/> Amount of Each Disbursement this Period 441.08
C.	Full Name (Last, First, Middle Initial) COMPTROLLER OF MARYLAND <hr/> Mailing Address STATE INCOME TAX BLDG <hr/> City ANNAPOLIS State MD Zip Code 21411 <hr/> Purpose of Disbursement PAYROLL TAXES Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21-0.017274 Date of Disbursement 11 / 19 / 2010 <hr/> Amount of Each Disbursement this Period 110.27

SUBTOTAL of Disbursements This Page (optional) ▶

992.43

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CONFERENCE AMERICA INC	Transaction ID: SB21-0.016492
	Mailing Address PO BOX 241188	Date of Disbursement 10 / 14 / 2010
	City MONTGOMERY State AL Zip Code 36124-1188	Amount of Each Disbursement this Period 2941.60
	Purpose of Disbursement PHONE SVC Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) CONFERENCE AMERICA INC	Transaction ID: SB21-0.017135
	Mailing Address PO BOX 241188	Date of Disbursement 11 / 18 / 2010
	City MONTGOMERY State AL Zip Code 36124-1188	Amount of Each Disbursement this Period 2711.79
	Purpose of Disbursement PHONE SERVICE Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) CONRAD DIRECT INC	Transaction ID: SB21-0.016651
	Mailing Address 300 KNICKERBOCKER RD	Date of Disbursement 10 / 21 / 2010
	City CRESSKILL State NJ Zip Code 07626	Amount of Each Disbursement this Period 1520.28
	Purpose of Disbursement DATA PROCESSING SERVICES Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

7173.67

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DATALAB USA LLC	Transaction ID: SB21-0.016652
	Mailing Address 20261 GOLDENROD LN	Date of Disbursement 10 / 21 / 2010
	City GERMANTOWN State MD Zip Code 20876	Amount of Each Disbursement this Period 23000.00
	Purpose of Disbursement DATA PROCESSING SERVICES	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) DATALAB USA LLC	Transaction ID: SB21-0.016953
	Mailing Address 20261 GOLDENROD LN	Date of Disbursement 11 / 10 / 2010
	City GERMANTOWN State MD Zip Code 20876	Amount of Each Disbursement this Period 23000.00
	Purpose of Disbursement DATA PROCESSING SERVICES	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) DATALAB USA LLC	Transaction ID: SB21-0.017103
	Mailing Address 20261 GOLDENROD LN	Date of Disbursement 11 / 18 / 2010
	City GERMANTOWN State MD Zip Code 20876	Amount of Each Disbursement this Period 5500.00
	Purpose of Disbursement DATA PROCESSING SERVICES	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	51500.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DC RENTAL	Transaction ID: SB21-0.016955 Date of Disbursement
	Mailing Address 3826 SOUTH FOUR MILE RUN DRIVE	<input type="text" value="11"/> <input type="text" value="10"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City ARLINGTON State VA Zip Code 22206	Amount of Each Disbursement this Period
	Purpose of Disbursement EQUIPMENT RENTAL	<input type="text" value="280.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) DC TREASURER	Transaction ID: SB21-0.016494 Date of Disbursement
	Mailing Address PO BOX 96384	<input type="text" value="10"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20090-6384	Amount of Each Disbursement this Period
	Purpose of Disbursement TAXES	<input type="text" value="3181.20"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) DC TREASURER	Transaction ID: SB21-0.016789 Date of Disbursement
	Mailing Address PO BOX 37630	<input type="text" value="10"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20013	Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL TAXES	<input type="text" value="6390.63"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="9851.83"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DC TREASURER	Transaction ID: SB21-0.016790 Date of Disbursement																			
	Mailing Address PO BOX 1582	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	2		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	2		2	0	1	0												
	City WASHINGTON State DC Zip Code 20013	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PAYROLL TAXES	<table border="1"><tr><td>58.85</td></tr></table>	58.85																		
58.85																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) DC TREASURER	Transaction ID: SB21-0.017090 Date of Disbursement																			
	Mailing Address PO BOX 37630	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	5		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	5		2	0	1	0												
	City WASHINGTON State DC Zip Code 20013	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PAYROLL TAXES	<table border="1"><tr><td>6538.94</td></tr></table>	6538.94																		
6538.94																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) DC TREASURER	Transaction ID: SB21-0.017091 Date of Disbursement																			
	Mailing Address PO BOX 1582	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	5		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	5		2	0	1	0												
	City WASHINGTON State DC Zip Code 20013	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PAYROLL TAXES	<table border="1"><tr><td>114.23</td></tr></table>	114.23																		
114.23																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>6712.02</td></tr></table>	6712.02
6712.02		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DC TREASURER	Transaction ID: SB21-0.017137 Date of Disbursement
	Mailing Address PO BOX 96384	<input type="text" value="11"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20090-6384	Amount of Each Disbursement this Period
	Purpose of Disbursement TAXES	<input type="text" value="1715.18"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) DC TREASURER	Transaction ID: SB21-0.017272 Date of Disbursement
	Mailing Address PO BOX 37630	<input type="text" value="11"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20013	Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL TAXES	<input type="text" value="1613.70"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) DC TREASURER	Transaction ID: SB21-0.017273 Date of Disbursement
	Mailing Address PO BOX 1582	<input type="text" value="11"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20013	Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL TAXES	<input type="text" value="24.75"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3353.63"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) DEVANNEY GROUP LLC <hr/> Mailing Address P.O. BOX 7553 <hr/> City PITTSBURGH State PA Zip Code 15213 <hr/> Purpose of Disbursement FINANCE CONSULTING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016933 Date of Disbursement 11 / 09 / 2010
	Amount of Each Disbursement this Period 250.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) DMM MEDIA LLC <hr/> Mailing Address 3299 K ST NW SUITE 200 <hr/> City WASHINGTON State DC Zip Code 20007 <hr/> Purpose of Disbursement MEDIA Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016884 Date of Disbursement 11 / 04 / 2010
	Amount of Each Disbursement this Period 19289.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) ELAVON <hr/> Mailing Address ONE CONCOURSE PKWY, STE 300 <hr/> City ATLANTA State GA Zip Code 30328 <hr/> Purpose of Disbursement BANK FEE Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017283 Date of Disbursement 11 / 22 / 2010
	Amount of Each Disbursement this Period 45.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	19584.00
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) ELAVON <hr/> Mailing Address ONE CONCOURSE PKWY, STE 300 <hr/> City ATLANTA State GA Zip Code 30328 Purpose of Disbursement BANK FEE Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017284 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 2 / 2 0 1 0
	Amount of Each Disbursement this Period 74.99
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) ELAVON <hr/> Mailing Address ONE CONCOURSE PKWY, STE 300 <hr/> City ATLANTA State GA Zip Code 30328 Purpose of Disbursement BANK FEE Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017287 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 2 / 2 0 1 0
	Amount of Each Disbursement this Period 4004.40
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) ELAVON <hr/> Mailing Address ONE CONCOURSE PKWY, STE 300 <hr/> City ATLANTA State GA Zip Code 30328 Purpose of Disbursement BANK FEE Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017291 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 2 / 2 0 1 0
	Amount of Each Disbursement this Period 7059.15
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	11138.54
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ELAVON	Transaction ID: SB21-0.017293 Date of Disbursement 11 / 22 / 2010
	Mailing Address ONE CONCOURSE PKWY, STE 300	Amount of Each Disbursement this Period 64.56
	City ATLANTA State GA Zip Code 30328	
	Purpose of Disbursement BANK FEE	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) ELAVON	Transaction ID: SB21-0.017298 Date of Disbursement 11 / 22 / 2010
	Mailing Address ONE CONCOURSE PKWY, STE 300	Amount of Each Disbursement this Period 21879.79
	City ATLANTA State GA Zip Code 30328	
	Purpose of Disbursement BANK FEE	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) EMOTIVE	Transaction ID: SB21-0.016453 Date of Disbursement 10 / 14 / 2010
	Mailing Address 2800 SHIRLINGTON RD STE 901	Amount of Each Disbursement this Period 3753.28
	City ARLINGTON State VA Zip Code 22206	
	Purpose of Disbursement WEB SERVICE	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	25697.63
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) EMOTIVE	Transaction ID: SB21-0.016653 Date of Disbursement
	Mailing Address 2800 SHIRLINGTON RD STE 901	<input type="text" value="10"/> <input type="text" value="21"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City ARLINGTON State VA Zip Code 22206	Amount of Each Disbursement this Period
	Purpose of Disbursement WEB SERVICE	<input type="text" value="3000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) EMOTIVE	Transaction ID: SB21-0.017105 Date of Disbursement
	Mailing Address 2800 SHIRLINGTON RD STE 901	<input type="text" value="11"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City ARLINGTON State VA Zip Code 22206	Amount of Each Disbursement this Period
	Purpose of Disbursement WEB SERVICE	<input type="text" value="3000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ENCK'S CUSTOM CATERING	Transaction ID: SB21-0.016454 Date of Disbursement
	Mailing Address 244 GRANITE RUN DRIVE	<input type="text" value="10"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City LANCASTER State PA Zip Code 17601	Amount of Each Disbursement this Period
	Purpose of Disbursement CATERING	<input type="text" value="2460.04"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="8460.04"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ENGAGE LLC	Transaction ID: SB21-0.016495
	Mailing Address 707 8TH ST SE SUITE 200	Date of Disbursement 10 / 14 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 1500.00
	Purpose of Disbursement WEB SERVICE Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) EPIPHANY PRODUCTIONS INC	Transaction ID: SB21-0.016455
	Mailing Address 104 E HUME AVE	Date of Disbursement 10 / 14 / 2010
	City ALEXANDRIA State VA Zip Code 22301	Amount of Each Disbursement this Period 700.00
	Purpose of Disbursement FINANCE CONSULTING Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) EPIPHANY PRODUCTIONS INC	Transaction ID: SB21-0.016861
	Mailing Address 104 E HUME AVE	Date of Disbursement 11 / 01 / 2010
	City ALEXANDRIA State VA Zip Code 22301	Amount of Each Disbursement this Period 10000.00
	Purpose of Disbursement FINANCE CONSULTING Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

12200.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) FABRIZIO MCLAUGHLIN AND ASSOCIATES INC	Transaction ID: SB21-0.016886 Date of Disbursement 11 / 04 / 2010
	Mailing Address 915 KING ST 2ND FL	Amount of Each Disbursement this Period 45000.00
	City ALEXANDRIA State VA Zip Code 22314	
	Purpose of Disbursement SURVEY RESEARCH	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FABRIZIO MCLAUGHLIN AND ASSOCIATES INC	Transaction ID: SB21-0.017139 Date of Disbursement 11 / 18 / 2010
	Mailing Address 915 KING ST 2ND FL	Amount of Each Disbursement this Period 5000.00
	City ALEXANDRIA State VA Zip Code 22314	
	Purpose of Disbursement SURVEY RESEARCH	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FEDEX KINKOS	Transaction ID: SB21-0.016457 Date of Disbursement 10 / 14 / 2010
	Mailing Address PO BOX 672085	Amount of Each Disbursement this Period 1461.21
	City DALLAS State TX Zip Code 75267-2085	
	Purpose of Disbursement PRINTING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	51461.21
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 2895 / 3187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) FEDEX KINKOS	Transaction ID: SB21-0.017106
	Mailing Address PO BOX 672085	Date of Disbursement MM / DD / YYYY 11 / 18 / 2010
	City DALLAS State TX Zip Code 75267-2085	Amount of Each Disbursement this Period 330.47
	Purpose of Disbursement PRINTING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) GKV, LLC	Transaction ID: SB21-0.016654
	Mailing Address 4189 SOUTH FOUR MILE RUN DRIVE SUITE 404	Date of Disbursement MM / DD / YYYY 10 / 21 / 2010
	City ARLINGTON State VA Zip Code 22204	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement POLITICAL STRATEGY CONSULTING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) GKV, LLC	Transaction ID: SB21-0.016862
	Mailing Address 4189 SOUTH FOUR MILE RUN DRIVE SUITE 404	Date of Disbursement MM / DD / YYYY 11 / 01 / 2010
	City ARLINGTON State VA Zip Code 22204	Amount of Each Disbursement this Period 6500.00
	Purpose of Disbursement POLITICAL STRATEGY CONSULTING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	9330.47
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. GUARDIAN LIFE INSURANCE COMPANY

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 95101

City CHICAGO State IL Zip Code 60694-5101

Purpose of Disbursement HEALTH INSURANCE

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB21-0.016825

Date of Disbursement

10 / 28 / 2010

Amount of Each Disbursement this Period

47199.21

B. GULF DIRECT

Full Name (Last, First, Middle Initial)

Mailing Address 8213 SHOAL CREEK BLVD STE 105

City AUSTIN State TX Zip Code 78757

Purpose of Disbursement FINANCE CONSULTING

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB21-0.016458

Date of Disbursement

10 / 14 / 2010

Amount of Each Disbursement this Period

15770.62

C. GULF DIRECT

Full Name (Last, First, Middle Initial)

Mailing Address 8213 SHOAL CREEK BLVD STE 105

City AUSTIN State TX Zip Code 78757

Purpose of Disbursement FINANCE CONSULTING

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB21-0.016923

Date of Disbursement

11 / 05 / 2010

Amount of Each Disbursement this Period

883.59

SUBTOTAL of Disbursements This Page (optional) ►

63853.42

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) GULF DIRECT</p> <p>Mailing Address 8213 SHOAL CREEK BLVD STE 105</p> <p>City AUSTIN State TX Zip Code 78757</p> <p>Purpose of Disbursement FINANCE CONSULTING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.017107</p> <p>Date of Disbursement 11 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 17224.78</p>
<p>B. Full Name (Last, First, Middle Initial) HARLAND CLARKE</p> <p>Mailing Address 10931 LAUREATE DR</p> <p>City SAN ANTONIO State TX Zip Code 78249</p> <p>Purpose of Disbursement OFFICE SUPPIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.017300</p> <p>Date of Disbursement 11 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 53.45</p>
<p>C. Full Name (Last, First, Middle Initial) HASLER FINANCIAL SERVICES</p> <p>Mailing Address PO BOX 45850</p> <p>City SAN FRANCISCO State CA Zip Code 94145</p> <p>Purpose of Disbursement POSTAGE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.017279</p> <p>Date of Disbursement 11 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

18278.23

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) HILL RESEARCH CONSULTANTS	Transaction ID: SB21-0.016889
	Mailing Address PO BOX 3290	Date of Disbursement 11 / 04 / 2010
	City AUBURN State AL Zip Code 36831	Amount of Each Disbursement this Period 11500.00
	Purpose of Disbursement SURVEY RESEARCH	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) HOLTZMAN VOGEL PLLC	Transaction ID: SB21-0.016864
	Mailing Address 45 NORTH HILL DR SUITE 100	Date of Disbursement 11 / 01 / 2010
	City WARRENTON State VA Zip Code 20186	Amount of Each Disbursement this Period 15000.00
	Purpose of Disbursement LEGAL CONSULTING	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) HOON DESIGNS LLC	Transaction ID: SB21-0.016459
	Mailing Address 2800 SHIRLINGTON RD STE 920	Date of Disbursement 10 / 14 / 2010
	City ARLINGTON State VA Zip Code 22206	Amount of Each Disbursement this Period 3900.00
	Purpose of Disbursement PRINTING	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	30400.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 2899 / 3187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) HOON DESIGNS LLC	Transaction ID: SB21-0.016657 Date of Disbursement																			
	Mailing Address 2800 SHIRLINGTON RD STE 920	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>2</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	1	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	2	1	/	2	0	1	0												
	City ARLINGTON State VA Zip Code 22206	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PRINTING	<table border="1"><tr><td>1350.00</td></tr></table>	1350.00																		
1350.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) HUCKABY DAVIS LISKER	Transaction ID: SB21-0.016865 Date of Disbursement																			
	Mailing Address 228 S WASHINGTON ST STE 115	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	1	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	0	1	/	2	0	1	0												
	City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period																			
	Purpose of Disbursement COMPLIANCE CONSULTING	<table border="1"><tr><td>10000.00</td></tr></table>	10000.00																		
10000.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) III-INTERACTIVE LLC	Transaction ID: SB21-0.016891 Date of Disbursement																			
	Mailing Address 2011 CHAPEL PLAZA CT SUITE 105	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>0</td><td>4</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	4	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	0	4	/	2	0	1	0												
	City COLUMBIA State MO Zip Code 65203	Amount of Each Disbursement this Period																			
	Purpose of Disbursement ECAMPAIGN CONSULTING	<table border="1"><tr><td>2416.10</td></tr></table>	2416.10																		
2416.10																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>13766.10</td></tr></table>	13766.10
13766.10		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td> </td></tr></table>	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ILLUMEN	Transaction ID: SB21-0.016629
	Mailing Address 1000 POTOMAC ST NW	Date of Disbursement 10 / 21 / 2010
	City WASHINGTON State DC Zip Code 20007	Amount of Each Disbursement this Period 1667.00
	Purpose of Disbursement SUBSCRIPTION	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) ILLUMEN	Transaction ID: SB21-0.017140
	Mailing Address 1000 POTOMAC ST NW	Date of Disbursement 11 / 18 / 2010
	City WASHINGTON State DC Zip Code 20007	Amount of Each Disbursement this Period 1667.00
	Purpose of Disbursement SUBSCRIPTIONS	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) INFOCISION MANAGEMENT CORP	Transaction ID: SB21-0.016659
	Mailing Address 325 SPRINGSIDE DR	Date of Disbursement 10 / 21 / 2010
	City AKRON State OH Zip Code 44333	Amount of Each Disbursement this Period 84218.71
	Purpose of Disbursement FUNDRAISING PHONE CALLS	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	87552.71
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) INFOCISION MANAGEMENT CORP	Transaction ID: SB21-0.016925
	Mailing Address 325 SPRINGSIDE DR	Date of Disbursement MM / DD / YYYY 11 / 05 / 2010
	City AKRON State OH Zip Code 44333	Amount of Each Disbursement this Period 114153.03
	Purpose of Disbursement FUNDRAISING PHONE CALLS	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) INFOCISION MANAGEMENT CORP	Transaction ID: SB21-0.017108
	Mailing Address 325 SPRINGSIDE DR	Date of Disbursement MM / DD / YYYY 11 / 18 / 2010
	City AKRON State OH Zip Code 44333	Amount of Each Disbursement this Period 11941.89
	Purpose of Disbursement FUNDRAISING PHONE CALLS	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) INFOCISION MANAGEMENT CORP	Transaction ID: SB21-0.017141
	Mailing Address 325 SPRINGSIDE DR	Date of Disbursement MM / DD / YYYY 11 / 18 / 2010
	City AKRON State OH Zip Code 44333	Amount of Each Disbursement this Period 139.65
	Purpose of Disbursement WEB SERVICE	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	126234.57
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) JOHN GILL CONSULTING</p> <p>Mailing Address 3424 WENTWOOD DR</p> <p>City DALLAS State TX Zip Code 75225</p> <p>Purpose of Disbursement FINANCE CONSULTING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016935</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="10327.40"/></p>
<p>B. Full Name (Last, First, Middle Initial) JONES DAY</p> <p>Mailing Address 51 LOUISIANA AVENUE NW</p> <p>City WASHINGTON State DC Zip Code 20001-2113</p> <p>Purpose of Disbursement CATERING / FACILITY RENTAL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016936</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="7216.11"/></p>
<p>C. Full Name (Last, First, Middle Initial) KARL ROVE & CO</p> <p>Mailing Address P.O. BOX 25564</p> <p>City WASHINGTON State DC Zip Code 20027</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016461</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="316.87"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="17860.38"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) KEY REACTIONS LLC	Transaction ID: SB21-0.016497 Date of Disbursement 10 / 14 / 2010
	Mailing Address 44 WEST CLINTON AVE	Amount of Each Disbursement this Period 5000.00
	City IRVINGTON State NY Zip Code 10533	
	Purpose of Disbursement MEDIA	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) KEY REACTIONS LLC	Transaction ID: SB21-0.017142 Date of Disbursement 11 / 18 / 2010
	Mailing Address 44 WEST CLINTON AVE	Amount of Each Disbursement this Period 3224.24
	City IRVINGTON State NY Zip Code 10533	
	Purpose of Disbursement ECAMPAIGN CONSULTING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) KONICA MINOLTA	Transaction ID: SB21-0.016498 Date of Disbursement 10 / 14 / 2010
	Mailing Address 21146 NETWORK PLACE	Amount of Each Disbursement this Period 1463.45
	City CHICAGO State IL Zip Code 60673-1211	
	Purpose of Disbursement EQUIPMENT RENTAL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	9687.69
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) KONICA MINOLTA Mailing Address 21146 NETWORK PLACE City CHICAGO State IL Zip Code 60673-1211 Purpose of Disbursement EQUIPMENT RENTAL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016828 Date of Disbursement 10 / 28 / 2010 Amount of Each Disbursement this Period 2066.41 Category/ Type
B.	Full Name (Last, First, Middle Initial) KONICA MINOLTA Mailing Address 21146 NETWORK PLACE City CHICAGO State IL Zip Code 60673-1211 Purpose of Disbursement EQUIPMENT RENTAL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017143 Date of Disbursement 11 / 18 / 2010 Amount of Each Disbursement this Period 1613.72 Category/ Type
C.	Full Name (Last, First, Middle Initial) MAIL AMERICA COMMUNICATIONS INC Mailing Address 1174 ELKTON FARM RD City FOREST State VA Zip Code 24551 Purpose of Disbursement PRINTING Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016662 Date of Disbursement 10 / 21 / 2010 Amount of Each Disbursement this Period 28229.39 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

31909.52

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MARK BLANKENSHIP ENTERPRISES	Transaction ID: SB21-0.016829
	Mailing Address 1116 SMITH STREET SUITE 300	Date of Disbursement 10 / 28 / 2010
	City CHARLESTON State WV Zip Code 25301	Amount of Each Disbursement this Period 7000.00
	Purpose of Disbursement SURVEY RESEARCH	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) MARK BLANKENSHIP ENTERPRISES	Transaction ID: SB21-0.016893
	Mailing Address 1116 SMITH STREET SUITE 300	Date of Disbursement 11 / 04 / 2010
	City CHARLESTON State WV Zip Code 25301	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement SURVEY RESEARCH	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) MARKET TECH GROUP	Transaction ID: SB21-0.016462
	Mailing Address PO BOX 26864	Date of Disbursement 10 / 14 / 2010
	City SALT LAKE CITY State UT Zip Code 84126	Amount of Each Disbursement this Period 1055.60
	Purpose of Disbursement FUNDRAISING PHONE CALLS	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	9055.60
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MCLAUGHLIN AND ASSOCIATES INC

Mailing Address 566 S RT 303

City State Zip Code
BLAUVELT NY 10913

Purpose of Disbursement
SURVEY RESEARCH

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21-0.016499
Date of Disbursement

10 / 14 / 2010

Amount of Each Disbursement this Period

45655.00

B. Full Name (Last, First, Middle Initial)
MCLAUGHLIN AND ASSOCIATES INC

Mailing Address 566 S RT 303

City State Zip Code
BLAUVELT NY 10913

Purpose of Disbursement
SURVEY RESEARCH

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21-0.016830
Date of Disbursement

10 / 28 / 2010

Amount of Each Disbursement this Period

21586.00

C. Full Name (Last, First, Middle Initial)
MCLAUGHLIN AND ASSOCIATES INC

Mailing Address 566 S RT 303

City State Zip Code
BLAUVELT NY 10913

Purpose of Disbursement
SURVEY RESEARCH

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21-0.016894
Date of Disbursement

11 / 04 / 2010

Amount of Each Disbursement this Period

46905.00

SUBTOTAL of Disbursements This Page (optional) ▶

114146.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MDI IMAGING AND MAIL	Transaction ID: SB21-0.016464
	Mailing Address 21955 CASCADES PKWY	Date of Disbursement 10 / 14 / 2010
	City DULLES State VA Zip Code 20166	Amount of Each Disbursement this Period 19448.22
	Purpose of Disbursement PRINTING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) MERKLE INC	Transaction ID: SB21-0.016465
	Mailing Address 100 JAMISON CT	Date of Disbursement 10 / 14 / 2010
	City HAGERSTOWN State MD Zip Code 21740	Amount of Each Disbursement this Period 4462.00
	Purpose of Disbursement PRINTING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MERKLE INC	Transaction ID: SB21-0.016663
	Mailing Address 100 JAMISON CT	Date of Disbursement 10 / 21 / 2010
	City HAGERSTOWN State MD Zip Code 21740	Amount of Each Disbursement this Period 60242.62
	Purpose of Disbursement DATA PROCESSING SERVICES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	84152.84
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MERKLE INC	Transaction ID: SB21-0.017109
	Mailing Address 100 JAMISON CT	Date of Disbursement MM / DD / YYYY 11 / 18 / 2010
	City HAGERSTOWN State MD Zip Code 21740	Amount of Each Disbursement this Period 56835.67
	Purpose of Disbursement DATA PROCESSING SERVICES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) MJO SERVICES	Transaction ID: SB21-0.017110
	Mailing Address 1101 BUSINESS PARKWAY SOUTH	Date of Disbursement MM / DD / YYYY 11 / 18 / 2010
	City WESTMINSTER State MD Zip Code 21157	Amount of Each Disbursement this Period 382.59
	Purpose of Disbursement DATA PROCESSING SERVICES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) MNICH AUTOMOTIVE INC	Transaction ID: SB21-0.016466
	Mailing Address 1458 DUBLIN RD	Date of Disbursement MM / DD / YYYY 10 / 14 / 2010
	City COLUMBUS State OH Zip Code 43215	Amount of Each Disbursement this Period 5575.00
	Purpose of Disbursement TRAVEL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	62793.26
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) MNICH AUTOMOTIVE INC <hr/> Mailing Address 1458 DUBLIN RD <hr/> City COLUMBUS State OH Zip Code 43215 <hr/> Purpose of Disbursement TRAVEL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016664 Date of Disbursement 10 / 21 / 2010
	Amount of Each Disbursement this Period 376.31
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) MOBILE FKM <hr/> Mailing Address 1800 WEST LOOP SOUTH SUITE 2100 <hr/> City HOUSTON State TX Zip Code 77027 <hr/> Purpose of Disbursement ECAMPAIGN CONSULTING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016895 Date of Disbursement 11 / 04 / 2010
	Amount of Each Disbursement this Period 3626.38
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) MOBY DICK AIRWAYS, LTD. <hr/> Mailing Address P.O. BOX 77518 <hr/> City WASHINGTON State DC Zip Code 20013-8518 <hr/> Purpose of Disbursement TRAVEL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016896 Date of Disbursement 11 / 04 / 2010
	Amount of Each Disbursement this Period 3799.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

7801.69

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) MOORE INFORMATION</p> <p>Mailing Address 428 4TH ST STE 8</p> <p>City ANNAPOLIS State MD Zip Code 21403</p> <p>Purpose of Disbursement SURVEY RESEARCH</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016500</p> <p>Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 16100.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) MOORE INFORMATION</p> <p>Mailing Address 428 4TH ST STE 8</p> <p>City ANNAPOLIS State MD Zip Code 21403</p> <p>Purpose of Disbursement SURVEY RESEARCH</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016630</p> <p>Date of Disbursement 10 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 2200.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) MOORE INFORMATION</p> <p>Mailing Address 428 4TH ST STE 8</p> <p>City ANNAPOLIS State MD Zip Code 21403</p> <p>Purpose of Disbursement SURVEY RESEARCH</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016831</p> <p>Date of Disbursement 10 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 16425.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

34725.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MOORE INFORMATION</p> <p>Mailing Address 428 4TH ST STE 8</p> <p>City ANNAPOLIS State MD Zip Code 21403</p> <p>Purpose of Disbursement SURVEY RESEARCH</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.017145 Date of Disbursement 11 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 11250.00</p>
<p>B. Full Name (Last, First, Middle Initial) NATIONAL FITNESS NETWORK</p> <p>Mailing Address 14059 VISTA DR #140-B</p> <p>City LAUREL State MD Zip Code 20707</p> <p>Purpose of Disbursement SUBSCRIPTION</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016833 Date of Disbursement 10 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 380.00</p>
<p>C. Full Name (Last, First, Middle Initial) NATIONAL MAILING SYSTEMS</p> <p>Mailing Address 1749 OLD MEADOW ROAD SUITE 200</p> <p>City MCLEAN State VA Zip Code 22102-4314</p> <p>Purpose of Disbursement OFFICE SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016501 Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 112.26</p>

SUBTOTAL of Disbursements This Page (optional) ▶

11742.26

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) NATIONAL MAILING SYSTEMS	Transaction ID: SB21-0.017146 Date of Disbursement
	Mailing Address 1749 OLD MEADOW ROAD SUITE 200	<input type="text" value="11"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City MCLEAN State VA Zip Code 22102-4314	Amount of Each Disbursement this Period
	Purpose of Disbursement POSTAGE	<input type="text" value="20.13"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) NATIONAL NEWS AGENCY	Transaction ID: SB21-0.017147 Date of Disbursement
	Mailing Address 4331 BLADENSBURG ROAD	<input type="text" value="11"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City COLMAR MANOR State MD Zip Code 20722	Amount of Each Disbursement this Period
	Purpose of Disbursement SUBSCRIPTIONS	<input type="text" value="1907.58"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) NATIONAL RESEARCH INC	Transaction ID: SB21-0.016502 Date of Disbursement
	Mailing Address 6 SHERWOOD CT	<input type="text" value="10"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City HOLMDEL State NJ Zip Code 07733	Amount of Each Disbursement this Period
	Purpose of Disbursement SURVEY RESEARCH	<input type="text" value="13500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="15427.71"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) NATIONAL RESEARCH INC <hr/> Mailing Address 6 SHERWOOD CT <hr/> City HOLMDEL State NJ Zip Code 07733 <hr/> Purpose of Disbursement SURVEY RESEARCH Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016631 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 1 0
	Amount of Each Disbursement this Period 5000.00
	Category/ Type
	(Empty box for Category/Type)
B. Full Name (Last, First, Middle Initial) NATIONAL RESEARCH INC <hr/> Mailing Address 6 SHERWOOD CT <hr/> City HOLMDEL State NJ Zip Code 07733 <hr/> Purpose of Disbursement SURVEY RESEARCH Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016834 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 1 0
	Amount of Each Disbursement this Period 9500.00
	Category/ Type
	(Empty box for Category/Type)
C. Full Name (Last, First, Middle Initial) NATIONAL RESEARCH INC <hr/> Mailing Address 6 SHERWOOD CT <hr/> City HOLMDEL State NJ Zip Code 07733 <hr/> Purpose of Disbursement SURVEY RESEARCH Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016897 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 1 0
	Amount of Each Disbursement this Period 14750.00
	Category/ Type
	(Empty box for Category/Type)

SUBTOTAL of Disbursements This Page (optional) ▶

29250.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) NATIONAL RESEARCH INC <hr/> Mailing Address 6 SHERWOOD CT <hr/> City HOLMDEL State NJ Zip Code 07733 <hr/> Purpose of Disbursement SURVEY RESEARCH Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017148 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 8 / 2 0 1 0
	Amount of Each Disbursement this Period 2500.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) NEP, INC <hr/> Mailing Address 1200 WAKE FOREST DRIVE <hr/> City ALEXANDRIA State VA Zip Code 22307 <hr/> Purpose of Disbursement PRINTING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017111 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 8 / 2 0 1 0
	Amount of Each Disbursement this Period 7972.80
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) NEW ENGLAND PRESS INC <hr/> Mailing Address 1200 WAKE FOREST DR <hr/> City ALEXANDRIA State VA Zip Code 22307 <hr/> Purpose of Disbursement PRINTING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016898 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 1 0
	Amount of Each Disbursement this Period 1125.14
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	11597.94
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) NEW ENGLAND PRESS INC <hr/> Mailing Address 1200 WAKE FOREST DR <hr/> City ALEXANDRIA State VA Zip Code 22307 <hr/> Purpose of Disbursement PRINTING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017149 Date of Disbursement 11 / 18 / 2010 <hr/> Amount of Each Disbursement this Period 235.55
B.	Full Name (Last, First, Middle Initial) NOREAST CAPITAL CORPORATION <hr/> Mailing Address PO BOX 4128 <hr/> City ANNAPOLIS State MD Zip Code 21403 <hr/> Purpose of Disbursement EQUIPMENT RENTAL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017150 Date of Disbursement 11 / 18 / 2010 <hr/> Amount of Each Disbursement this Period 477.00
C.	Full Name (Last, First, Middle Initial) OCCASIONS CATERERS <hr/> Mailing Address 5458 3RD ST NE <hr/> City WASHINGTON State DC Zip Code 20011 <hr/> Purpose of Disbursement CATERING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016468 Date of Disbursement 10 / 14 / 2010 <hr/> Amount of Each Disbursement this Period 4396.52

SUBTOTAL of Disbursements This Page (optional) ▶	5109.07
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) OCTOBER INC <hr/> Mailing Address PO BOX 370672 <hr/> City LAS VEGAS State NV Zip Code 89137 <hr/> Purpose of Disbursement FINANCE CONSULTING Candidate Name Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21-0.016469 Date of Disbursement 10 / 14 / 2010 <hr/> Amount of Each Disbursement this Period 7680.00
B.	Full Name (Last, First, Middle Initial) ONMESSAGE INC <hr/> Mailing Address 2130 PRIEST BRIDGE DR # 11 <hr/> City CROFTON State MD Zip Code 21114 <hr/> Purpose of Disbursement SURVEY RESEARCH Candidate Name Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21-0.016503 Date of Disbursement 10 / 14 / 2010 <hr/> Amount of Each Disbursement this Period 1370.00
C.	Full Name (Last, First, Middle Initial) ONMESSAGE INC <hr/> Mailing Address 2130 PRIEST BRIDGE DR # 11 <hr/> City CROFTON State MD Zip Code 21114 <hr/> Purpose of Disbursement SURVEY RESEARCH Candidate Name Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21-0.016632 Date of Disbursement 10 / 21 / 2010 <hr/> Amount of Each Disbursement this Period 3750.00

SUBTOTAL of Disbursements This Page (optional) ▶

12800.00

TOTAL This Period (last page this line number only) ▶

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ONMESSAGE INC Mailing Address 2130 PRIEST BRIDGE DR # 11 City CROFTON State MD Zip Code 21114 Purpose of Disbursement SURVEY RESEARCH Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016835 Date of Disbursement 10 / 28 / 2010 Amount of Each Disbursement this Period 13150.00
B.	Full Name (Last, First, Middle Initial) ONMESSAGE INC Mailing Address 2130 PRIEST BRIDGE DR # 11 City CROFTON State MD Zip Code 21114 Purpose of Disbursement SURVEY RESEARCH Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016899 Date of Disbursement 11 / 04 / 2010 Amount of Each Disbursement this Period 55338.19
C.	Full Name (Last, First, Middle Initial) ONMESSAGE INC Mailing Address 2130 PRIEST BRIDGE DR # 11 City CROFTON State MD Zip Code 21114 Purpose of Disbursement SURVEY RESEARCH Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017151 Date of Disbursement 11 / 18 / 2010 Amount of Each Disbursement this Period 24950.00

SUBTOTAL of Disbursements This Page (optional) ▶

93438.19

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) OVERRIDE PRO	Transaction ID: SB21-0.016504
	Mailing Address 4798 S FLORIDA AVE #177	Date of Disbursement 10 / 14 / 2010
	City LAKELAND State FL Zip Code 33813-2181	Amount of Each Disbursement this Period 750.00
	Purpose of Disbursement SUBSCRIPTIONS	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) OVERRIDE PRO	Transaction ID: SB21-0.017152
	Mailing Address 4798 S FLORIDA AVE #177	Date of Disbursement 11 / 18 / 2010
	City LAKELAND State FL Zip Code 33813-2181	Amount of Each Disbursement this Period 750.00
	Purpose of Disbursement SUBSCRIPTIONS	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) PACIFIC FUNDRAISING GROUP	Transaction ID: SB21-0.016667
	Mailing Address 2208 29TH STREET, STE 300	Date of Disbursement 10 / 21 / 2010
	City SACRAMENTO State CA Zip Code 95817	Amount of Each Disbursement this Period 6462.60
	Purpose of Disbursement FINANCE CONSULTING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	7962.60
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) PARKING MANAGEMENT COMPANY</p> <p>Mailing Address 306 42ND AVENUE NORTH</p> <p>City NASHVILLE State TN Zip Code 37209</p> <p>Purpose of Disbursement TRANSPORTATION SVC</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016470</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="448.50"/></p>
<p>B. Full Name (Last, First, Middle Initial) PKL CONSULTING</p> <p>Mailing Address 621 THORNWOOD LANE</p> <p>City NORTHFIELD State IL Zip Code 60093</p> <p>Purpose of Disbursement FINANCE CONSULTING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016471</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="2100.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) PLUVIOUS</p> <p>Mailing Address 801 S. GRAND AVENUE, #2001</p> <p>City LOS ANGELES State CA Zip Code 90017</p> <p>Purpose of Disbursement FINANCE CONSULTING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016939</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="21918.00"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="24466.50"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) POLITICAL JUMP, LLC</p> <p>Mailing Address 5850 T.G. Lee Blvd, STE 340</p> <p>City ORLANDO State FL Zip Code 32822</p> <p>Purpose of Disbursement FUNDRAISING PHONE CALLS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016669</p> <p>Date of Disbursement 10 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 6231.49</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) POLITICAL JUMP, LLC</p> <p>Mailing Address 5850 T.G. Lee Blvd, STE 340</p> <p>City ORLANDO State FL Zip Code 32822</p> <p>Purpose of Disbursement FUNDRAISING PHONE CALLS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.017112</p> <p>Date of Disbursement 11 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 6898.70</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) PRESS ASSOCIATION INC</p> <p>Mailing Address P.O. BOX 414243</p> <p>City BOSTON State MA Zip Code 02241-4243</p> <p>Purpose of Disbursement SUBSCRIPTION</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016505</p> <p>Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 1507.28</p>

SUBTOTAL of Disbursements This Page (optional) ▶

14637.47

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) PRESS ASSOCIATION INC	Transaction ID: SB21-0.016900
	Mailing Address P.O. BOX 414243	Date of Disbursement MM / DD / YYYY 11 / 04 / 2010
	City BOSTON State MA Zip Code 02241-4243	Amount of Each Disbursement this Period 1507.28
	Purpose of Disbursement SUBSCRIPTIONS	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) PRESTONWOOD COUNTRY CLUB	Transaction ID: SB21-0.016670
	Mailing Address P.O. BOX 796607	Date of Disbursement MM / DD / YYYY 10 / 21 / 2010
	City DALLAS State TX Zip Code 75379	Amount of Each Disbursement this Period 1389.00
	Purpose of Disbursement CATERING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) PRESTONWOOD COUNTRY CLUB	Transaction ID: SB21-0.016940
	Mailing Address P.O. BOX 796607	Date of Disbursement MM / DD / YYYY 11 / 09 / 2010
	City DALLAS State TX Zip Code 75379	Amount of Each Disbursement this Period 1570.10
	Purpose of Disbursement CATERING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

4466.38

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) PUBLIC OPINION STRATEGIES Mailing Address 214 N FAYETTE ST City ALEXANDRIA State VA Zip Code 22314 Purpose of Disbursement SURVEY RESEARCH Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016506 Date of Disbursement 10 / 14 / 2010
	Amount of Each Disbursement this Period 103250.00
B. Full Name (Last, First, Middle Initial) PUBLIC OPINION STRATEGIES Mailing Address 214 N FAYETTE ST City ALEXANDRIA State VA Zip Code 22314 Purpose of Disbursement SURVEY RESEARCH Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016634 Date of Disbursement 10 / 21 / 2010
	Amount of Each Disbursement this Period 61750.00
C. Full Name (Last, First, Middle Initial) PUBLIC OPINION STRATEGIES Mailing Address 214 N FAYETTE ST City ALEXANDRIA State VA Zip Code 22314 Purpose of Disbursement SURVEY RESEARCH Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016838 Date of Disbursement 10 / 28 / 2010
	Amount of Each Disbursement this Period 103600.00

SUBTOTAL of Disbursements This Page (optional) ▶

268600.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) PUBLIC OPINION STRATEGIES	Transaction ID: SB21-0.016901 Date of Disbursement
	Mailing Address 214 N FAYETTE ST	<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2010"/>
	City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement SURVEY RESEARCH	<input type="text" value="64000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PURSUANT	Transaction ID: SB21-0.016941 Date of Disbursement
	Mailing Address 5151 BELTLINE ROAD, STE 900	<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>
	City DALLAS State TX Zip Code 75254	Amount of Each Disbursement this Period
	Purpose of Disbursement FINANCE CONSULTING	<input type="text" value="29912.52"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) QWEST COMMUNICATIONS	Transaction ID: SB21-0.016902 Date of Disbursement
	Mailing Address PO BOX 85619	<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2010"/>
	City LOUISVILLE State KY Zip Code 40285-6169	Amount of Each Disbursement this Period
	Purpose of Disbursement PHONE SVC	<input type="text" value="1678.11"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="95590.63"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) REPUBLICAN DEPOT, LLC	Transaction ID: SB21-0.016472
	Mailing Address P.O. BOX 222	Date of Disbursement 10 / 14 / 2010
	City UNION CITY State IN Zip Code 47390	Amount of Each Disbursement this Period 2450.80
	Purpose of Disbursement WEB SERVICE Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) REPUBLICAN DEPOT, LLC	Transaction ID: SB21-0.016507
	Mailing Address P.O. BOX 222	Date of Disbursement 10 / 14 / 2010
	City UNION CITY State IN Zip Code 47390	Amount of Each Disbursement this Period 423.64
	Purpose of Disbursement WEB SERVICE Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) REPUBLICAN DEPOT, LLC	Transaction ID: SB21-0.016671
	Mailing Address P.O. BOX 222	Date of Disbursement 10 / 21 / 2010
	City UNION CITY State IN Zip Code 47390	Amount of Each Disbursement this Period 2514.60
	Purpose of Disbursement WEB SERVICE Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	5389.04
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) REPUBLICAN DEPOT, LLC	Transaction ID: SB21-0.016957 Date of Disbursement																			
	Mailing Address P.O. BOX 222	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	0	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	1	0	/	2	0	1	0												
	City UNION CITY State IN Zip Code 47390	Amount of Each Disbursement this Period																			
	Purpose of Disbursement WEB SERVICE	<table border="1"><tr><td>157.29</td></tr></table>	157.29																		
157.29																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) RESPONSE AMERICA LLC	Transaction ID: SB21-0.016473 Date of Disbursement																			
	Mailing Address 264 N LUMPKIN STREET #202	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>1</td><td>4</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	4	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	1	4	/	2	0	1	0												
	City ATHENS State GA Zip Code 30601	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PRINTING/POSTAGE	<table border="1"><tr><td>35777.74</td></tr></table>	35777.74																		
35777.74																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) RESPONSE AMERICA LLC	Transaction ID: SB21-0.017113 Date of Disbursement																			
	Mailing Address 264 N LUMPKIN STREET #202	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>1</td><td>8</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	8	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	1	8	/	2	0	1	0												
	City ATHENS State GA Zip Code 30601	Amount of Each Disbursement this Period																			
	Purpose of Disbursement FINANCE CONSULTING	<table border="1"><tr><td>12667.28</td></tr></table>	12667.28																		
12667.28																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>48602.31</td></tr></table>	48602.31
48602.31		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) RST MARKETING ASSOCIATES INC	Transaction ID: SB21-0.016474
	Mailing Address 1272 CORPORATE PARK RD	Date of Disbursement 10 / 14 / 2010
	City FOREST State VA Zip Code 24551	Amount of Each Disbursement this Period 6983.72
	Purpose of Disbursement POSTAGE	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) RST MARKETING ASSOCIATES INC	Transaction ID: SB21-0.017114
	Mailing Address 1272 CORPORATE PARK RD	Date of Disbursement 11 / 18 / 2010
	City FOREST State VA Zip Code 24551	Amount of Each Disbursement this Period 6891.04
	Purpose of Disbursement PRINTING	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) SCR & ASSOCIATES, LLC	Transaction ID: SB21-0.016475
	Mailing Address 4 LEBLANC DRIVE	Date of Disbursement 10 / 14 / 2010
	City DANVERS State MA Zip Code 01923	Amount of Each Disbursement this Period 247.94
	Purpose of Disbursement FINANCE CONSULTING	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	14122.70
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) SCR & ASSOCIATES, LLC <hr/> Mailing Address 4 LEBLANC DRIVE <hr/> City DANVERS State MA Zip Code 01923 <hr/> Purpose of Disbursement FINANCE CONSULTING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016942 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 1 0
	Amount of Each Disbursement this Period 7040.00
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) SHANNA WOODBURY CONSULTING, LLC <hr/> Mailing Address P.O. BOX 120697 <hr/> City ST. PAUL State MN Zip Code 55112 <hr/> Purpose of Disbursement FINANCE CONSULTING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016476 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 1 0
	Amount of Each Disbursement this Period 250.00
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) SMART SOURCE RENTALS <hr/> Mailing Address PO BOX 289 <hr/> City LAUREL State NY Zip Code 11948 <hr/> Purpose of Disbursement EQUIPMENT RENTAL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016510 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 1 0
	Amount of Each Disbursement this Period 1067.85
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	8357.85
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) SMARTECH CORPORATION <hr/> Mailing Address PO BOX 11181 <hr/> City CHATTANOOGA State TN Zip Code 37401-2181 <hr/> Purpose of Disbursement WEB SERVICE Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016509 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 1 0
	Amount of Each Disbursement this Period 2182.69
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) SMARTECH CORPORATION <hr/> Mailing Address PO BOX 11181 <hr/> City CHATTANOOGA State TN Zip Code 37401-2181 <hr/> Purpose of Disbursement WEB HOSTING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016903 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 1 0
	Amount of Each Disbursement this Period 414.60
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) SMARTECH CORPORATION <hr/> Mailing Address PO BOX 11181 <hr/> City CHATTANOOGA State TN Zip Code 37401-2181 <hr/> Purpose of Disbursement WEB SERVICE Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017155 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 8 / 2 0 1 0
	Amount of Each Disbursement this Period 1612.58
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

4209.87

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) SOUTHWEST PUBLISHING AND MAILING <hr/> Mailing Address 2600 NW TOPEKA BLVD <hr/> City TOPEKA State KS Zip Code 66617 <hr/> Purpose of Disbursement POSTAGE Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016917 Date of Disbursement 11 / 05 / 2010 <hr/> Amount of Each Disbursement this Period 44879.65
B.	Full Name (Last, First, Middle Initial) SOUTHWEST PUBLISHING AND MAILING <hr/> Mailing Address 2600 NW TOPEKA BLVD <hr/> City TOPEKA State KS Zip Code 66617 <hr/> Purpose of Disbursement PRINTING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017115 Date of Disbursement 11 / 18 / 2010 <hr/> Amount of Each Disbursement this Period 43342.66
C.	Full Name (Last, First, Middle Initial) SPELNA INC <hr/> Mailing Address 225 INDUSTRIAL CT <hr/> City FREDERICKSBURG State VA Zip Code 22408 <hr/> Purpose of Disbursement UTILITIES Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016841 Date of Disbursement 10 / 28 / 2010 <hr/> Amount of Each Disbursement this Period 469.46

SUBTOTAL of Disbursements This Page (optional) ▶

88691.77

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) SQUARE 737 LLC	Transaction ID: SB21-0.016874 Date of Disbursement 11 / 02 / 2010
	Mailing Address 1100 New Jersey Ave SE SUITE 1000	Amount of Each Disbursement this Period 2970.00
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PARKING SVC Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) SQUARE 737 LLC	Transaction ID: SB21-0.017156 Date of Disbursement 11 / 18 / 2010
	Mailing Address 1100 New Jersey Ave SE SUITE 1000	Amount of Each Disbursement this Period 2970.00
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PARKING Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) SRCP MEDIA	Transaction ID: SB21-0.016635 Date of Disbursement 10 / 21 / 2010
	Mailing Address 201 N UNION ST. SUITE 200	Amount of Each Disbursement this Period 6852.00
	City ALEXANDRIA State VA Zip Code 22314	
	Purpose of Disbursement MEDIA Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	12792.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) SRCP MEDIA	Transaction ID: SB21-0.016904 Date of Disbursement
	Mailing Address 201 N UNION ST. SUITE 200	<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2010"/>
	City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement MEDIA	<input type="text" value="32786.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) STAPLES CREDIT PLAN	Transaction ID: SB21-0.016842 Date of Disbursement
	Mailing Address 8725 W SAHARA	<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City LAS VEGAS State NV Zip Code 89163	Amount of Each Disbursement this Period
	Purpose of Disbursement OFFICE SUPPLIES	<input type="text" value="4040.32"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) STATE OF NEW HAMPSHIRE UNEMPLOYMENT SECURITY	Transaction ID: SB21-0.017282 Date of Disbursement
	Mailing Address 32 SOUTH MAIN ST	<input type="text" value="11"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City CONCORD State NH Zip Code 03301	Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL TAXES	<input type="text" value="370.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="37196.32"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) STRATEGIC FUNDRAISING INC <hr/> Mailing Address 2625 MOMENTUM PL <hr/> City CHICAGO State IL Zip Code 60689-5326 <hr/> Purpose of Disbursement FUNDRAISING PHONE CALLS Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016478 Date of Disbursement 10 / 14 / 2010 <hr/> Amount of Each Disbursement this Period 81561.05
B.	Full Name (Last, First, Middle Initial) STRATEGIC FUNDRAISING INC <hr/> Mailing Address 2625 MOMENTUM PL <hr/> City CHICAGO State IL Zip Code 60689-5326 <hr/> Purpose of Disbursement FUNDRAISING PHONE CALLS Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016672 Date of Disbursement 10 / 21 / 2010 <hr/> Amount of Each Disbursement this Period 45909.60
C.	Full Name (Last, First, Middle Initial) STRATEGIC FUNDRAISING INC <hr/> Mailing Address 2625 MOMENTUM PL <hr/> City CHICAGO State IL Zip Code 60689-5326 <hr/> Purpose of Disbursement FUNDRAISING PHONE CALLS Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016943 Date of Disbursement 11 / 09 / 2010 <hr/> Amount of Each Disbursement this Period 40194.30

SUBTOTAL of Disbursements This Page (optional) ▶	167664.95
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 2933 / 3187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) STRATEGIC FUNDRAISING INC <hr/> Mailing Address 2625 MOMENTUM PL <hr/> City CHICAGO State IL Zip Code 60689-5326 <hr/> Purpose of Disbursement FUNDRAISING PHONE CALLS Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017116 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 8 / 2 0 1 0
	Amount of Each Disbursement this Period 4379.95
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) SUMMIT OPEN SYSTEMS LLC <hr/> Mailing Address PO BOX 841 <hr/> City ARNOLD State MD Zip Code 21012 <hr/> Purpose of Disbursement COMPLIANCE CONSULTING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016636 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 1 0
	Amount of Each Disbursement this Period 300.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) SUSAN GAGE CATERERS <hr/> Mailing Address 7411 LIVINGSTON RD <hr/> City OXON HILL State MD Zip Code 20745 <hr/> Purpose of Disbursement CATERING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016479 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 1 0
	Amount of Each Disbursement this Period 334.40
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

5014.35

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. TARGETING GROUP	Full Name (Last, First, Middle Initial)	Transaction ID: SB21-0.016905	
	Mailing Address 1800 WEST LOOP SO. STE 2100	Date of Disbursement	
	City HOUSTON State TX Zip Code 77027	<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2010"/>	
	Purpose of Disbursement ECAMPAIGN CONSULTING	Amount of Each Disbursement this Period	
	Candidate Name	<input type="text" value="10635.01"/>	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General	
	State: District:	<input type="checkbox"/> Other (specify) ▼	

B. TARGETPOINT CONSULTING	Full Name (Last, First, Middle Initial)	Transaction ID: SB21-0.016511	
	Mailing Address 66 CANAL CENTER PLAZA NO 555	Date of Disbursement	
	City ALEXANDRIA State VA Zip Code 22314	<input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>	
	Purpose of Disbursement SURVEY RESEARCH	Amount of Each Disbursement this Period	
	Candidate Name	<input type="text" value="6700.00"/>	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General	
	State: District:	<input type="checkbox"/> Other (specify) ▼	

C. TEL OPINION RESEARCH LLC	Full Name (Last, First, Middle Initial)	Transaction ID: SB21-0.016513	
	Mailing Address 901 KING STREET, S400	Date of Disbursement	
	City ALEXANDRIA State VA Zip Code 22314	<input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>	
	Purpose of Disbursement SURVEY RESEARCH	Amount of Each Disbursement this Period	
	Candidate Name	<input type="text" value="6975.00"/>	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General	
	State: District:	<input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="24310.01"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) THE MCINTOSH COMPANY <hr/> Mailing Address 5310 HARVEST HILL ROAD, STE 209 <hr/> City DALLAS State TX Zip Code 75230 <hr/> Purpose of Disbursement FINANCE CONSULTING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016463 Date of Disbursement 10 / 14 / 2010 <hr/> Amount of Each Disbursement this Period 48288.00
B.	Full Name (Last, First, Middle Initial) THE MCINTOSH COMPANY <hr/> Mailing Address 5310 HARVEST HILL ROAD, STE 209 <hr/> City DALLAS State TX Zip Code 75230 <hr/> Purpose of Disbursement FINANCE CONSULTING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016866 Date of Disbursement 11 / 01 / 2010 <hr/> Amount of Each Disbursement this Period 7500.00
C.	Full Name (Last, First, Middle Initial) THE MCINTOSH COMPANY <hr/> Mailing Address 5310 HARVEST HILL ROAD, STE 209 <hr/> City DALLAS State TX Zip Code 75230 <hr/> Purpose of Disbursement FINANCE CONSULTING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016938 Date of Disbursement 11 / 09 / 2010 <hr/> Amount of Each Disbursement this Period 59160.00

SUBTOTAL of Disbursements This Page (optional) ▶	114948.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) THE PARTY GIRL</p> <p>Mailing Address 1704 SHADY HILL ROAD, NE</p> <p>City MARIETTA State GA Zip Code 30068</p> <p>Purpose of Disbursement CATERING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016944</p> <p>Date of Disbursement 11 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 125.00</p>
<p>B. Full Name (Last, First, Middle Initial) THE POLLING COMPANY</p> <p>Mailing Address 1220 CONNECTICUT AVENUE NW</p> <p>City WASHINGTON State DC Zip Code 20036</p> <p>Purpose of Disbursement SURVEY RESEARCH</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016837</p> <p>Date of Disbursement 10 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 4053.00</p>
<p>C. Full Name (Last, First, Middle Initial) THE TARRANCE GROUP</p> <p>Mailing Address 201 N UNION ST STE 410</p> <p>City ALEXANDRIA State VA Zip Code 22314</p> <p>Purpose of Disbursement SURVEY RESEARCH</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.016512</p> <p>Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 69686.00</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>73864.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) THE TARRANCE GROUP <hr/> Mailing Address 201 N UNION ST STE 410 <hr/> City ALEXANDRIA State VA Zip Code 22314 <hr/> Purpose of Disbursement SURVEY RESEARCH Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016637 Date of Disbursement 10 / 21 / 2010
	Amount of Each Disbursement this Period 34545.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) THE TARRANCE GROUP <hr/> Mailing Address 201 N UNION ST STE 410 <hr/> City ALEXANDRIA State VA Zip Code 22314 <hr/> Purpose of Disbursement SURVEY RESEARCH Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016843 Date of Disbursement 10 / 28 / 2010
	Amount of Each Disbursement this Period 60921.50
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) THE TARRANCE GROUP <hr/> Mailing Address 201 N UNION ST STE 410 <hr/> City ALEXANDRIA State VA Zip Code 22314 <hr/> Purpose of Disbursement SURVEY RESEARCH Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016906 Date of Disbursement 11 / 04 / 2010
	Amount of Each Disbursement this Period 33268.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	128734.50
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) THE TARRANCE GROUP	Transaction ID: SB21-0.017157 Date of Disbursement 11 / 18 / 2010	
	Mailing Address 201 N UNION ST STE 410		Amount of Each Disbursement this Period 3500.00
	City ALEXANDRIA State VA Zip Code 22314		
	Purpose of Disbursement SURVEY RESEARCH Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) THE UNIVERSITY CLUB	Transaction ID: SB21-0.016480 Date of Disbursement 10 / 14 / 2010	
	Mailing Address P.O. BOX 5475		Amount of Each Disbursement this Period 2438.26
	City NEW YORK State NY Zip Code 10087-5475		
	Purpose of Disbursement CATERING Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) THE WOODS HERBERGER GROUP	Transaction ID: SB21-0.016871 Date of Disbursement 11 / 01 / 2010	
	Mailing Address 1200 ANASTASIA AVENUE, STE 310		Amount of Each Disbursement this Period 5000.00
	City CORAL GABLES State FL Zip Code 33416		
	Purpose of Disbursement FINANCE CONSULTING Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

10938.26

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) TRANSAMERICA RETIREMENT SERVICES Mailing Address PO BOX 30368 City LOS ANGELES State CA Zip Code 90099-9208 Purpose of Disbursement RETIREMENT SERVICES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21-0.016794 Date of Disbursement 10 / 22 / 2010
	Amount of Each Disbursement this Period 15401.33

B. Full Name (Last, First, Middle Initial) TRANSAMERICA RETIREMENT SERVICES Mailing Address PO BOX 30368 City LOS ANGELES State CA Zip Code 90099-9208 Purpose of Disbursement RETIREMENT SERVICES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21-0.017095 Date of Disbursement 11 / 05 / 2010
	Amount of Each Disbursement this Period 15461.33

C. Full Name (Last, First, Middle Initial) TRANSAMERICA RETIREMENT SERVICES Mailing Address PO BOX 30368 City LOS ANGELES State CA Zip Code 90099-9208 Purpose of Disbursement RETIREMENT SERVICES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21-0.017277 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 3830.33

SUBTOTAL of Disbursements This Page (optional) ▶	34692.99
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) TROUTMAN SANDERS LLP	Transaction ID: SB21-0.016638 Date of Disbursement 10 / 21 / 2010
	Mailing Address 1660 INTERNATIONAL DR STE 600 TYSONS CORNER	Amount of Each Disbursement this Period 525.00
	City MCLEAN State VA Zip Code 22102-3805	
	Purpose of Disbursement LEGAL CONSULTING	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) UPS	Transaction ID: SB21-0.016481 Date of Disbursement 10 / 14 / 2010
	Mailing Address PO BOX 7247-0244	Amount of Each Disbursement this Period 250.00
	City PHILADELPHIA State PA Zip Code 19170-0001	
	Purpose of Disbursement CATERING	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) UPS STORE	Transaction ID: SB21-0.017158 Date of Disbursement 11 / 18 / 2010
	Mailing Address 611 PENNSYLVANIA AVE SE	Amount of Each Disbursement this Period 230.00
	City WASHINGTON State DC Zip Code 20003-4303	
	Purpose of Disbursement PRINTING	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

1005.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) US DEPARTMENT OF TREASURY	Transaction ID: SB21-0.016792 Date of Disbursement
	Mailing Address 1500 PENNSYLVANIA AVE NW	<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City WASHINGTON State DC Zip Code 20220	Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL TAXES	<input type="text" value="57820.25"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) US DEPARTMENT OF TREASURY	Transaction ID: SB21-0.017093 Date of Disbursement
	Mailing Address 1500 PENNSYLVANIA AVE NW	<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2010"/>
	City WASHINGTON State DC Zip Code 20220	Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL TAXES	<input type="text" value="58061.63"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) US DEPARTMENT OF TREASURY	Transaction ID: SB21-0.017275 Date of Disbursement
	Mailing Address 1500 PENNSYLVANIA AVE NW	<input type="text" value="11"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City WASHINGTON State DC Zip Code 20220	Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL TAXES	<input type="text" value="14170.24"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="130052.12"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) US MONITOR SERVICE	Transaction ID: SB21-0.016482 Date of Disbursement																			
	Mailing Address 86 MAPLE AVE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>1</td><td>4</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	4	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	1	4	/	2	0	1	0												
	City NEW YORK State NY Zip Code 10956-5092	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DATA PROCESSING SERVICES	<table border="1"><tr><td>530.80</td></tr></table>	530.80																		
530.80																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) US MONITOR SERVICE	Transaction ID: SB21-0.016959 Date of Disbursement																			
	Mailing Address 86 MAPLE AVE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	0	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	1	0	/	2	0	1	0												
	City NEW YORK State NY Zip Code 10956-5092	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DATA PROCESSING SERVICES	<table border="1"><tr><td>298.35</td></tr></table>	298.35																		
298.35																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) US POSTMASTER	Transaction ID: SB21-0.016673 Date of Disbursement																			
	Mailing Address 900 BRENTWOOD ROAD NE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>2</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	1	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	2	1	/	2	0	1	0												
	City WASHINGTON State DC Zip Code 20018-1004	Amount of Each Disbursement this Period																			
	Purpose of Disbursement POSTAGE	<table border="1"><tr><td>40000.00</td></tr></table>	40000.00																		
40000.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>40829.15</td></tr></table>	40829.15
40829.15		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td> </td></tr></table>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) US POSTMASTER Mailing Address 900 BRENTWOOD ROAD NE City WASHINGTON State DC Zip Code 20018-1004 Purpose of Disbursement POSTAGE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017117 Date of Disbursement 11 / 18 / 2010
	Amount of Each Disbursement this Period 1040.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) US POSTMASTER Mailing Address 900 BRENTWOOD ROAD NE City WASHINGTON State DC Zip Code 20018-1004 Purpose of Disbursement POSTAGE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017123 Date of Disbursement 11 / 18 / 2010
	Amount of Each Disbursement this Period 770.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) US POSTMASTER Mailing Address 900 BRENTWOOD ROAD NE City WASHINGTON State DC Zip Code 20018-1004 Purpose of Disbursement POSTAGE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017124 Date of Disbursement 11 / 18 / 2010
	Amount of Each Disbursement this Period 770.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

2580.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) US POSTMASTER <hr/> Mailing Address 900 BRENTWOOD ROAD NE <hr/> City WASHINGTON State DC Zip Code 20018-1004 <hr/> Purpose of Disbursement POSTAGE Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017126 Date of Disbursement 11 / 18 / 2010	Amount of Each Disbursement this Period 1040.00
B.	Full Name (Last, First, Middle Initial) US POSTMASTER <hr/> Mailing Address 900 BRENTWOOD ROAD NE <hr/> City WASHINGTON State DC Zip Code 20018-1004 <hr/> Purpose of Disbursement POSTAGE Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017127 Date of Disbursement 11 / 18 / 2010	Amount of Each Disbursement this Period 1040.00
C.	Full Name (Last, First, Middle Initial) US POSTMASTER <hr/> Mailing Address 900 BRENTWOOD ROAD NE <hr/> City WASHINGTON State DC Zip Code 20018-1004 <hr/> Purpose of Disbursement POSTAGE Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017128 Date of Disbursement 11 / 18 / 2010	Amount of Each Disbursement this Period 1040.00

SUBTOTAL of Disbursements This Page (optional)	3120.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) US POSTMASTER <hr/> Mailing Address 900 BRENTWOOD ROAD NE <hr/> City WASHINGTON State DC Zip Code 20018-1004 Purpose of Disbursement POSTAGE Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017129 Date of Disbursement 11 / 18 / 2010
	Amount of Each Disbursement this Period 770.00
	Category/Type
	Category/Type
B. Full Name (Last, First, Middle Initial) US POSTMASTER <hr/> Mailing Address 900 BRENTWOOD ROAD NE <hr/> City WASHINGTON State DC Zip Code 20018-1004 Purpose of Disbursement POSTAGE Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017130 Date of Disbursement 11 / 18 / 2010
	Amount of Each Disbursement this Period 770.00
	Category/Type
	Category/Type
C. Full Name (Last, First, Middle Initial) VANDOR STRATEGIES <hr/> Mailing Address 1325 PENNSYLVANIA AVE NW SUITE 700 <hr/> City WASHINGTON State DC Zip Code 20004 Purpose of Disbursement POLITICAL STRATEGY CONSULTING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016872 Date of Disbursement 11 / 01 / 2010
	Amount of Each Disbursement this Period 11250.00
	Category/Type
	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

12790.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) VERIZON CABS <hr/> Mailing Address PO BOX 4832 <hr/> City TRENTON State NJ Zip Code 08650-4832 <hr/> Purpose of Disbursement PHONE SVC Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016514 Date of Disbursement 10 / 14 / 2010
	Amount of Each Disbursement this Period 1663.10
	Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) VERIZON CABS <hr/> Mailing Address PO BOX 4832 <hr/> City TRENTON State NJ Zip Code 08650-4832 <hr/> Purpose of Disbursement PHONE SERVICE Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017159 Date of Disbursement 11 / 18 / 2010
	Amount of Each Disbursement this Period 1652.86
	Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) VIRGINIA CONSULTING GROUP, LLC <hr/> Mailing Address 114 DUKE STREET <hr/> City ALEXANDRIA State VA Zip Code 22314 <hr/> Purpose of Disbursement FINANCE CONSULTING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.017119 Date of Disbursement 11 / 18 / 2010
	Amount of Each Disbursement this Period 4851.24
	Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

8167.20

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) VIRGINIA DEPT OF TAXATION	Transaction ID: SB21-0.016793
	Mailing Address PO BOX 1411	Date of Disbursement 10 / 22 / 2010
	City RICHMOND State VA Zip Code 23212	Amount of Each Disbursement this Period 4617.63
	Purpose of Disbursement PAYROLL TAXES	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) VIRGINIA DEPT OF TAXATION	Transaction ID: SB21-0.017094
	Mailing Address PO BOX 1411	Date of Disbursement 11 / 05 / 2010
	City RICHMOND State VA Zip Code 23212	Amount of Each Disbursement this Period 4581.90
	Purpose of Disbursement PAYROLL TAXES	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) VIRGINIA DEPT OF TAXATION	Transaction ID: SB21-0.017276
	Mailing Address PO BOX 1411	Date of Disbursement 11 / 19 / 2010
	City RICHMOND State VA Zip Code 23212	Amount of Each Disbursement this Period 1131.96
	Purpose of Disbursement PAYROLL TAXES	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	10331.49
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) VISUAL IMPACT DESIGN	Transaction ID: SB21-0.017120 Date of Disbursement
	Mailing Address 264 N LUMPKIN STREET #202	<input type="text" value="11"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City ATHENS State GA Zip Code 30601	Amount of Each Disbursement this Period
	Purpose of Disbursement PRINTING	<input type="text" value="500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) WACHOVIA NA	Transaction ID: SB21-0.016875 Date of Disbursement
	Mailing Address 1970 CHAIN BRIDGE RD	<input type="text" value="11"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City MCLEAN State VA Zip Code 22102	Amount of Each Disbursement this Period
	Purpose of Disbursement LOAN INTEREST	<input type="text" value="11367.18"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) WACHOVIA NA	Transaction ID: SB21-0.017297 Date of Disbursement
	Mailing Address 1970 CHAIN BRIDGE RD	<input type="text" value="11"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City MCLEAN State VA Zip Code 22102	Amount of Each Disbursement this Period
	Purpose of Disbursement BANK FEE	<input type="text" value="7358.77"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="19225.95"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 2950 / 3187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) WASHINGTON COURIER	Transaction ID: SB21-0.016515 Date of Disbursement
	Mailing Address 5520 CHEROKEE AVE STE 120	<input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City ALEXANDRIA State VA Zip Code 22312	Amount of Each Disbursement this Period
	Purpose of Disbursement DELIVERY	<input type="text" value="57.40"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) WASHINGTON COURIER	Transaction ID: SB21-0.017162 Date of Disbursement
	Mailing Address 5520 CHEROKEE AVE STE 120	<input type="text" value="11"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City ALEXANDRIA State VA Zip Code 22312	Amount of Each Disbursement this Period
	Purpose of Disbursement DELIVERY	<input type="text" value="115.83"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) WESTAR SATELLITE SERVICES	Transaction ID: SB21-0.016907 Date of Disbursement
	Mailing Address PO BOX 974375	<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2010"/>
	City DALLAS State TX Zip Code 75397-4375	Amount of Each Disbursement this Period
	Purpose of Disbursement TV UPLINK SVC	<input type="text" value="9461.07"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="9634.30"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 2951 / 3187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
WESTAR SATELLITE SERVICES

Transaction ID: SB21-0.017163
Date of Disbursement

Mailing Address PO BOX 974375

/ /

City DALLAS State TX Zip Code 75397-4375

Amount of Each Disbursement this Period

Purpose of Disbursement
TV UPLINK SVC

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
WILKINS ENTERPRISE

Transaction ID: SB21-0.016676
Date of Disbursement

Mailing Address 11201 GLISSADE DR

/ /

City CLINTON State MD Zip Code 20735

Amount of Each Disbursement this Period

Purpose of Disbursement
MAINTENANCE

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
WILSON RESEARCH STRATEGIES

Transaction ID: SB21-0.016516
Date of Disbursement

Mailing Address 324 2ND ST SE

/ /

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

Purpose of Disbursement
SURVEY RESEARCH

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) ZONES Mailing Address PO BOX 34740 City SEATTLE State WA Zip Code 98124-1740 Purpose of Disbursement OFFICE SUPPLIES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016517 Date of Disbursement 10 / 14 / 2010
	Amount of Each Disbursement this Period 941.24
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) ZONES Mailing Address PO BOX 34740 City SEATTLE State WA Zip Code 98124-1740 Purpose of Disbursement EQUIPMENT PURCHASE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016639 Date of Disbursement 10 / 21 / 2010
	Amount of Each Disbursement this Period 4591.16
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) ZONES Mailing Address PO BOX 34740 City SEATTLE State WA Zip Code 98124-1740 Purpose of Disbursement EQUIPMENT PURCHASE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-0.016908 Date of Disbursement 11 / 04 / 2010
	Amount of Each Disbursement this Period 1791.08
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

7323.48

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ZONES	Transaction ID: SB21-0.017164 Date of Disbursement 11 / 18 / 2010
	Mailing Address PO BOX 34740	Amount of Each Disbursement this Period 2017.90
	City SEATTLE State WA Zip Code 98124-1740	
	Purpose of Disbursement OFFICE EQUIPMENT	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) OLSON FOR CONGRESS	Transaction ID: SA11B.13977521 Date of Disbursement 10 / 25 / 2010
	Mailing Address 16850 DIANA LANE SUITE A.	Amount of Each Disbursement this Period 21.91
	City HOUSTON State TX Zip Code 77058	
	Purpose of Disbursement IN-KIND: SHIPPING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) OLSON FOR CONGRESS	Transaction ID: SA11B.13977522 Date of Disbursement 10 / 25 / 2010
	Mailing Address 16850 DIANA LANE SUITE A.	Amount of Each Disbursement this Period 1320.21
	City HOUSTON State TX Zip Code 77058	
	Purpose of Disbursement IN-KIND: INVITATIONS AND POSTAGE	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	3360.02
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) REPUBLICAN NATIONAL COMMITTEE			Transaction ID: SB21-0.016508	
	Mailing Address 310 1ST ST SE			Date of Disbursement 10 / 14 / 2010	
City WASHINGTON		State DC	Zip Code 20003	Amount of Each Disbursement this Period 109635.00	
Purpose of Disbursement RENT			Category/ Type		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:					

SUBTOTAL of Disbursements This Page (optional) ▶

109635.00

TOTAL This Period (last page this line number only) ▶

3940553.10

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ALABAMA REPUBLICAN PARTY Mailing Address PO BOX 55628 City BIRMINGHAM State AL Zip Code 35255 Purpose of Disbursement TRANSFER Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB22-0.016607 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 1 0	Amount of Each Disbursement this Period 35000.00
B.	Full Name (Last, First, Middle Initial) ARIZONA REPUBLICAN PARTY Mailing Address 3501 N 24TH ST City PHOENIX State AZ Zip Code 85016 Purpose of Disbursement TRANSFER Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB22-0.016561 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 1 0	Amount of Each Disbursement this Period 45000.00
C.	Full Name (Last, First, Middle Initial) ARIZONA REPUBLICAN PARTY Mailing Address 3501 N 24TH ST City PHOENIX State AZ Zip Code 85016 Purpose of Disbursement TRANSFER Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB22-0.016642 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 1 0	Amount of Each Disbursement this Period 30000.00

SUBTOTAL of Disbursements This Page (optional)	110000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ARIZONA REPUBLICAN PARTY Mailing Address 3501 N 24TH ST City PHOENIX State AZ Zip Code 85016 Purpose of Disbursement TRANSFER Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB22-0.016701 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 1 0	Amount of Each Disbursement this Period 30000.00
B.	Full Name (Last, First, Middle Initial) INDIANA REPUBLICAN PARTY Mailing Address 47 SOUTH MERIDIAN ST 2ND FLOOR City INDIANAPOLIS State IN Zip Code 46204 Purpose of Disbursement TRANSFER Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB22-0.016445 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 1 0	Amount of Each Disbursement this Period 90000.00
C.	Full Name (Last, First, Middle Initial) INDIANA REPUBLICAN PARTY Mailing Address 47 SOUTH MERIDIAN ST 2ND FLOOR City INDIANAPOLIS State IN Zip Code 46204 Purpose of Disbursement TRANSFER Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB22-0.016558 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 1 0	Amount of Each Disbursement this Period 28000.00

SUBTOTAL of Disbursements This Page (optional)	148000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) INDIANA REPUBLICAN PARTY Mailing Address 47 SOUTH MERIDIAN ST 2ND FLOOR City INDIANAPOLIS State IN Zip Code 46204 Purpose of Disbursement TRANSFER Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB22-0.016609 Date of Disbursement 10 / 20 / 2010 Amount of Each Disbursement this Period 40000.00	
B.	Full Name (Last, First, Middle Initial) INDIANA REPUBLICAN PARTY Mailing Address 47 SOUTH MERIDIAN ST 2ND FLOOR City INDIANAPOLIS State IN Zip Code 46204 Purpose of Disbursement TRANSFER Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB22-0.016845 Date of Disbursement 10 / 28 / 2010 Amount of Each Disbursement this Period 20000.00	
C.	Full Name (Last, First, Middle Initial) MASSACHUSETTS REPUBLICAN PARTY Mailing Address 85 MERRIMAC ST SUITE 400 City BOSTON State MA Zip Code 02114 Purpose of Disbursement TRANSFER Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB22-0.016591 Date of Disbursement 10 / 19 / 2010 Amount of Each Disbursement this Period 35000.00	

SUBTOTAL of Disbursements This Page (optional) ▶	95000.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) NEW JERSEY REPUBLICAN STATE COMMITTEE</p> <p>Mailing Address 150 WEST STATE ST SUITE 230</p> <p>City TRENTON State NJ Zip Code 08608</p> <p>Purpose of Disbursement TRANSFER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB22-0.016641</p> <p>Date of Disbursement 10 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 100000.00</p>
<p>B. Full Name (Last, First, Middle Initial) NEW YORK REPUBLICAN STATE COMMITTEE</p> <p>Mailing Address 315 STATE ST</p> <p>City ALBANY State NY Zip Code 12210</p> <p>Purpose of Disbursement TRANSFER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB22-0.016559</p> <p>Date of Disbursement 10 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 60000.00</p>
<p>C. Full Name (Last, First, Middle Initial) NORTH DAKOTA REPUBLICAN PARTY</p> <p>Mailing Address 1029 5TH ST N</p> <p>City BISMARCK State ND Zip Code 58501</p> <p>Purpose of Disbursement TRANSFER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB22-0.016610</p> <p>Date of Disbursement 10 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 50000.00</p>

SUBTOTAL of Disbursements This Page (optional)	210000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) OHIO REPUBLICAN PARTY Mailing Address 211 S 5TH ST City COLUMBUS State OH Zip Code 43215 Purpose of Disbursement TRANSFER Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB22-0.016551 Date of Disbursement 10 / 15 / 2010 Amount of Each Disbursement this Period 180000.00
B.	Full Name (Last, First, Middle Initial) OREGON REPUBLICAN PARTY Mailing Address PO BOX 25406 City PORTLAND State OR Zip Code 97298 Purpose of Disbursement TRANSFER Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB22-0.016565 Date of Disbursement 10 / 18 / 2010 Amount of Each Disbursement this Period 20000.00
C.	Full Name (Last, First, Middle Initial) REPUBLICAN FEDERAL COMMITTEE OF PA Mailing Address 112 STATE ST City HARRISBURG State PA Zip Code 17101 Purpose of Disbursement TRANSFER Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB22-0.016550 Date of Disbursement 10 / 15 / 2010 Amount of Each Disbursement this Period 150000.00

SUBTOTAL of Disbursements This Page (optional) ▶	350000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) REPUBLICAN FEDERAL COMMITTEE OF PA</p> <p>Mailing Address 112 STATE ST</p> <p>City HARRISBURG State PA Zip Code 17101</p> <p>Purpose of Disbursement TRANSFER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB22-0.016592</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="110000.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) REPUBLICAN PARTY OF ARKANSAS</p> <p>Mailing Address 1201 W SIXTH</p> <p>City LITTLE ROCK State AR Zip Code 72201</p> <p>Purpose of Disbursement TRANSFER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB22-0.016608</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50000.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) REPUBLICAN PARTY OF LOUISIANA</p> <p>Mailing Address 530 LAKELAND DR SUITE 215</p> <p>City BATON ROUGE State LA Zip Code 70802</p> <p>Purpose of Disbursement TRANSFER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB22-0.016611</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="85000.00"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="245000.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) REPUBLICAN PARTY OF FLORIDA	Transaction ID: SB22-0.016640 Date of Disbursement																			
	Mailing Address PO BOX 311	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>2</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	1	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	2	1	/	2	0	1	0												
	City TALLAHASSEE State FL Zip Code 32302	Amount of Each Disbursement this Period																			
	Purpose of Disbursement TRANSFER	<table border="1"> <tr> <td>30000.00</td> </tr> </table>	30000.00																		
30000.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) REPUBLICAN FEDERAL COMMITTEE OF PA	Transaction ID: SB22-0.016693 Date of Disbursement																			
	Mailing Address 112 STATE ST	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>2</td><td>2</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	2	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	2	2	/	2	0	1	0												
	City HARRISBURG State PA Zip Code 17101	Amount of Each Disbursement this Period																			
	Purpose of Disbursement TRANSFER	<table border="1"> <tr> <td>78000.00</td> </tr> </table>	78000.00																		
78000.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

C.	Full Name (Last, First, Middle Initial) REPUBLICAN FEDERAL COMMITTEE OF PA	Transaction ID: SB22-0.016811 Date of Disbursement																			
	Mailing Address 112 STATE ST	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>2</td><td>7</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	7	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	2	7	/	2	0	1	0												
	City HARRISBURG State PA Zip Code 17101	Amount of Each Disbursement this Period																			
	Purpose of Disbursement TRANSFER	<table border="1"> <tr> <td>20000.00</td> </tr> </table>	20000.00																		
20000.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

SUBTOTAL of Disbursements This Page (optional)	<table border="1"> <tr> <td>128000.00</td> </tr> </table>	128000.00
128000.00		
TOTAL This Period (last page this line number only)	<table border="1"> <tr> <td></td> </tr> </table>	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
REPUBLICAN PARTY OF ARKANSAS

Mailing Address 1201 W SIXTH

City LITTLE ROCK State AR Zip Code 72201

Purpose of Disbursement TRANSFER

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB22-0.016869
Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
WASHINGTON STATE REPUBLICAN PARTY

Mailing Address 2840 NORTHUP WAY SUITE 140

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRANSFER

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB22-0.016560
Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) ANN MARIE BUERKLE FOR CONGRESS</p> <p>Mailing Address 3779 UNDERWOOD WAY</p> <p>City SYRACUSE State NY Zip Code 13215</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name ANN MARIE BUERKLE</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-0.016605</p> <p>Date of Disbursement 10 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>B. Full Name (Last, First, Middle Initial) BECKER FOR CONGRESS</p> <p>Mailing Address 1948 LEONARD LN</p> <p>City MERRICK State NY Zip Code 11566</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name FRANCIS X BECKER</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 04</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-0.016808</p> <p>Date of Disbursement 10 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>C. Full Name (Last, First, Middle Initial) BILL JOHNSON FOR CONGRESS COMMITTEE</p> <p>Mailing Address 3755 HUNTERS HILL</p> <p>City POLAND State OH Zip Code 44514</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name BILL JOHNSON</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 06</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-0.016522</p> <p>Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

15000.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) CRAVAACK FOR CONGRESS CAMPAIGN COMMITTEE</p> <p>Mailing Address PO BOX 951</p> <p>City NORTH BRANCH State MN Zip Code 55056</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name CHIP CRAVAACK</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 08</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-0.016852</p> <p>Date of Disbursement 10 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>B. Full Name (Last, First, Middle Initial) DEBICELLA FOR CONGRESS</p> <p>Mailing Address 1 LAZYPBROOK RD</p> <p>City SHELTON State CT Zip Code 06484</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name DAN DEBICELLA</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-0.016520</p> <p>Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>C. Full Name (Last, First, Middle Initial) ED MARTIN FOR CONGRESS</p> <p>Mailing Address 6037 HAMPTON AVE</p> <p>City ST LOUIS State MO Zip Code 63109</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name EDWARD R MARTIN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 03</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-0.016855</p> <p>Date of Disbursement 10 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

15000.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) ELECT BLAKE FARENTHOLD COMMITTEE</p> <p>Mailing Address 5601 OCEAN DR</p> <p>City CORPUS CHRISTI State TX Zip Code 78412</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name RANDOLPH BLAKE FARENTHOLD</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 27</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-0.016521</p> <p>Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>B. Full Name (Last, First, Middle Initial) FRIENDS OF JOHN LOUGHLIN</p> <p>Mailing Address PO BOX 244</p> <p>City ADAMSVILLE State RI Zip Code 02801</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name JOHN J LOUGHLIN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 01</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-0.016854</p> <p>Date of Disbursement 10 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>C. Full Name (Last, First, Middle Initial) JEFF PERRY FOR CONGRESS</p> <p>Mailing Address PO BOX 1435</p> <p>City SANDWICH State MA Zip Code 02563</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name JEFFREY DAVIS PERRY</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 10</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-0.016526</p> <p>Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

15000.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) JOE WALSH FOR CONGRESS COMMITTEE INC</p> <p>Mailing Address P.O. BOX 56 830 W. ROUTE 22</p> <p>City LAKE ZURICH State IL Zip Code 60047</p> <p>Purpose of Disbursement CONTRIBUTION-DEBT RETIREMENT</p> <p>Candidate Name JOE WALSH</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-0.016915</p> <p>Date of Disbursement 11 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>B. Full Name (Last, First, Middle Initial) LANDRY FOR LOUISIANA</p> <p>Mailing Address PO BOX 13816</p> <p>City NEW IBERIA State LA Zip Code 70562</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name JEFFREY M LANDRY</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 03</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-0.016523</p> <p>Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>C. Full Name (Last, First, Middle Initial) MILLER-MEEKS FOR CONGRESS</p> <p>Mailing Address PO BOX 3091</p> <p>City IOWA CITY State IA Zip Code 52244</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name MARIANNETTE JANE MILLER-MEEKS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 02</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-0.016524</p> <p>Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

15000.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) PALAZZO FOR CONGRESS</p> <p>Mailing Address 13155 HIGHWAY 67 STE B</p> <p>City BILOXI State MS Zip Code 39532</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name STEVEN MCCARTHY PALAZZO</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 04</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-0.016525</p> <p>Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>B. Full Name (Last, First, Middle Initial) PHILLIPS FOR CONGRESS</p> <p>Mailing Address 3523 PHYLLIS ST</p> <p>City ENDWELL State NY Zip Code 13760</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name GEORGE K PHILLIPS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 22</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-0.016809</p> <p>Date of Disbursement 10 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>C. Full Name (Last, First, Middle Initial) RAUL LABRADOR FOR IDAHO</p> <p>Mailing Address PO BOX 1616</p> <p>City BOISE State ID Zip Code 83701</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name RAUL RAFAEL LABRADOR</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 01</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-0.016853</p> <p>Date of Disbursement 10 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

15000.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
RENEE ELLMERS FOR CONGRESS COMMITTEE

Mailing Address PO BOX 904

City DUNN State NC Zip Code 28335

Purpose of Disbursement
CONTRIBUTION-DEBT RETIREMENT

Candidate Name
RENEE JACISIN ELLMERS

Office Sought: House
 Senate
 President

State: NC District: 02

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB23-0.016918
Date of Disbursement

11 / 05 / 2010

Amount of Each Disbursement this Period

5000.00

B. Full Name (Last, First, Middle Initial)
ROCKY FOR CONGRESS

Mailing Address 34122 WOODWARD AVE

City BIRMINGHAM State MI Zip Code 48009

Purpose of Disbursement
CONTRIBUTION

Candidate Name
ANDREW ROCKY RACZKOWSKI

Office Sought: House
 Senate
 President

State: MI District: 09

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB23-0.016606
Date of Disbursement

10 / 20 / 2010

Amount of Each Disbursement this Period

5000.00

C. Full Name (Last, First, Middle Initial)
RUTH MCCLUNG FOR CONGRESS

Mailing Address PO BOX 40544

City TUCSON State AZ Zip Code 85717

Purpose of Disbursement
CONTRIBUTION

Candidate Name
RUTH CRAWFORD MCCLUNG

Office Sought: House
 Senate
 President

State: AZ District: 07

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB23-0.016856
Date of Disbursement

10 / 29 / 2010

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional) ►

15000.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
SAM CALIGUIRI FOR CONGRESS

Mailing Address PO BOX 11252

City WATERBURY State CT Zip Code 06703

Purpose of Disbursement
CONTRIBUTION

Candidate Name
SAM CALIGUIRI

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: CT District: 05

Transaction ID: SB23-0.016519

Date of Disbursement

10 / 15 / 2010

Amount of Each Disbursement this Period

5000.00

B. Full Name (Last, First, Middle Initial)
VIDAK FOR CONGRESS

Mailing Address PO BOX 984

City WILLOWS State CA Zip Code 95988

Purpose of Disbursement
CONTRIBUTION

Candidate Name
JAMES ANDREW VIDAK

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: CA District: 20

Transaction ID: SB23-0.016527

Date of Disbursement

10 / 15 / 2010

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional) ►

10000.00

TOTAL This Period (last page this line number only) ►

10000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DEBORAH CARMICHAEL	Transaction ID: SB28A-0.016649 Date of Disbursement 10 / 21 / 2010	
	Mailing Address 15875 IRVINE ROAD		
	City WINCHESTER State KY Zip Code 40391-9339	Amount of Each Disbursement this Period	15.00
	Purpose of Disbursement CONTRIBUTION REFUND		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		
B.	Full Name (Last, First, Middle Initial) EDNA CHANDLER	Transaction ID: SB28A-0.016947 Date of Disbursement 11 / 10 / 2010	
	Mailing Address P.O. BOX 51		
	City MESICK State MI Zip Code 49668-0051	Amount of Each Disbursement this Period	10.00
	Purpose of Disbursement CONTRIBUTION REFUND		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		
C.	Full Name (Last, First, Middle Initial) RICHARD HOFF	Transaction ID: SB28A-0.016656 Date of Disbursement 10 / 21 / 2010	
	Mailing Address 3719 RUBY STREET, APT 4		
	City SCHILLER PARK State IL Zip Code 60176-2454	Amount of Each Disbursement this Period	150.00
	Purpose of Disbursement CONTRIBUTION REFUND		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶

175.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) STEFAN IFKO <hr/> Mailing Address 593 FLORIDA GROVE ROAD <hr/> City PERTH AMBOY State NJ Zip Code 08861-1570 <hr/> Purpose of Disbursement CONTRIBUTION REFUND Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-0.016658 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 1 0
	Amount of Each Disbursement this Period 34.00
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) VICTOR JOWORSKY <hr/> Mailing Address P.O. BOX 196 <hr/> City ORANGEBURG State NY Zip Code 10962-0196 <hr/> Purpose of Disbursement CONTRIBUTION REFUND Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-0.016660 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 1 0
	Amount of Each Disbursement this Period 20.00
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) DARRYL LONG <hr/> Mailing Address 27668 E KATY TRACK ROAD <hr/> City WALKER State MO Zip Code 64790-9198 <hr/> Purpose of Disbursement CONTRIBUTION REFUND Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-0.016661 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 1 0
	Amount of Each Disbursement this Period 101.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	155.00
TOTAL This Period (last page this line number only) ▶	155.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
NANETTE MOSS

Transaction ID: SB28A-0.016645
Date of Disbursement

Mailing Address 400 E CHURCH STREET

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	1	0

City ELMIRA State NY Zip Code 14901

Amount of Each Disbursement this Period

10.00

Purpose of Disbursement
CONTRIBUTION REFUND

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
NANETTE MOSS

Transaction ID: SB28A-0.016665
Date of Disbursement

Mailing Address 400 E CHURCH STREET

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	1	0

City ELMIRA State NY Zip Code 14901

Amount of Each Disbursement this Period

136.00

Purpose of Disbursement
CONTRIBUTION REFUND

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
EUGENE NAGEL

Transaction ID: SB28A-0.016666
Date of Disbursement

Mailing Address 110 S MANNSTON STREET

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	1	0

City GETTYSBURG State SD Zip Code 57442-1436

Amount of Each Disbursement this Period

20.00

Purpose of Disbursement
CONTRIBUTION REFUND

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

166.00

TOTAL This Period (last page this line number only) ►

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) HELEN PHILLIPS	Transaction ID: SB28A-0.016646 Date of Disbursement 10 / 21 / 2010
	Mailing Address 1006 N M STREET	
	City LAKE WORTH State FL Zip Code 33460-2246	Amount of Each Disbursement this Period 195.00
	Purpose of Disbursement CONTRIBUTION REFUND Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) HELEN PHILLIPS	Transaction ID: SB28A-0.016668 Date of Disbursement 10 / 21 / 2010
	Mailing Address 1006 N M STREET	
	City LAKE WORTH State FL Zip Code 33460-2246	Amount of Each Disbursement this Period 105.00
	Purpose of Disbursement CONTRIBUTION REFUND Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) DENNY WALSH	Transaction ID: SB28A-0.016675 Date of Disbursement 10 / 21 / 2010
	Mailing Address 6000 BASS LAKE DRIVE, STE 200	
	City MINNEAPOLIS State MN Zip Code 55429-2794	Amount of Each Disbursement this Period 200.00
	Purpose of Disbursement CONTRIBUTION REFUND Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	500.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) GERALD WOHLFEIL Mailing Address 3068 10TH COURT City GRAND MARSH State WI Zip Code 53936-9636 Purpose of Disbursement CONTRIBUTION REFUND Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-0.016677 Date of Disbursement 10 / 21 / 2010
	Amount of Each Disbursement this Period 20.00
B. Full Name (Last, First, Middle Initial) QUANA WOODS Mailing Address 142 E BROADWAY AVENUE City CLIFTON HEIGHTS State PA Zip Code 19018-2607 Purpose of Disbursement CONTRIBUTION REFUND Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-0.016678 Date of Disbursement 10 / 21 / 2010
	Amount of Each Disbursement this Period 120.00

SUBTOTAL of Disbursements This Page (optional) ▶

140.00

TOTAL This Period (last page this line number only) ▶

1136.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ANN MARIE BUERKLE FOR CONGRESS

Mailing Address 3779 UNDERWOOD WAY

City SYRACUSE State NY Zip Code 13215

Purpose of Disbursement
CONTRIBUTION-RECOUNT

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29-0.016914
Date of Disbursement

11 / 05 / 2010

Amount of Each Disbursement this Period

5000.00

B. Full Name (Last, First, Middle Initial)
ELECT BLAKE FARENTHOLD COMMITTEE

Mailing Address 5601 OCEAN DR

City CORPUS CHRISTI State TX Zip Code 78412

Purpose of Disbursement
CONTRIBUTION-RECOUNT

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29-0.016913
Date of Disbursement

11 / 05 / 2010

Amount of Each Disbursement this Period

5000.00

C. Full Name (Last, First, Middle Initial)
FIMIAN FOR CONGRESS 2010

Mailing Address PO BOX 3131

City OAKTON State VA Zip Code 22124

Purpose of Disbursement
CONTRIBUTION-RECOUNT

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29-0.016912
Date of Disbursement

11 / 05 / 2010

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional) ►

15000.00

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 2977 / 3187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
RENEE ELLMERS FOR CONGRESS COMMITTEE

Mailing Address PO BOX 904

City DUNN State NC Zip Code 28335

Purpose of Disbursement
CONTRIBUTION-RECOUNT

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29-0.016919

Date of Disbursement

11 / 05 / 2010

Amount of Each Disbursement this Period

5000.00

B. Full Name (Last, First, Middle Initial)
VIDAK FOR CONGRESS

Mailing Address PO BOX 984

City WILLOWS State CA Zip Code 95988

Purpose of Disbursement
CONTRIBUTION-RECOUNT

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29-0.016911

Date of Disbursement

11 / 05 / 2010

Amount of Each Disbursement this Period

5000.00

C. Full Name (Last, First, Middle Initial)
WHITAKER L ASKEW

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
RECOUNT PAYROLL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29-0.017187

Date of Disbursement

11 / 19 / 2010

Amount of Each Disbursement this Period

308.42

SUBTOTAL of Disbursements This Page (optional) ▶

10308.42

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) ALEX AVETOOM <hr/> Mailing Address 1761 LEMON TERR <hr/> City SANTA ANA State CA Zip Code 92705 <hr/> Purpose of Disbursement RECOUNT TRAVEL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017178 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 8 / 2 0 1 0
	Amount of Each Disbursement this Period 190.11
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) JACKIE M BARBER <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017188 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 1314.11
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) JONATHAN R BLACK <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017189 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 2172.43
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	3676.65
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) GREGORY A BLAIR</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement RECOUNT PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29-0.017190 Date of Disbursement 11 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 1048.21</p>
<p>B. Full Name (Last, First, Middle Initial) MICHAEL F BOBER</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement RECOUNT PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29-0.017191 Date of Disbursement 11 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 1845.14</p>
<p>C. Full Name (Last, First, Middle Initial) LISA BOOTHE</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement RECOUNT PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29-0.017192 Date of Disbursement 11 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 665.31</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3558.66

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
NATALIE BUCHANAN

Transaction ID: SB29-0.017193
Date of Disbursement

Mailing Address 320 1ST ST SE

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	9		2	0	1	0

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

Purpose of Disbursement
RECOUNT PAYROLL

938.20

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
JOANNA BURGOS

Transaction ID: SB29-0.017194
Date of Disbursement

Mailing Address 320 1ST ST SE

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	9		2	0	1	0

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

Purpose of Disbursement
RECOUNT PAYROLL

1372.94

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
MARK BURRIS

Transaction ID: SB29-0.017179
Date of Disbursement

Mailing Address 320 1ST ST SE

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	8		2	0	1	0

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

Purpose of Disbursement
RECOUNT TRAVEL

318.86

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

2630.00

TOTAL This Period (last page this line number only)

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) LAURA M CAMP	Transaction ID: SB29-0.017195
	Mailing Address 320 1ST ST SE	Date of Disbursement MM / DD / YYYY 11 / 19 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 993.02
	Purpose of Disbursement RECOUNT PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ERIM V CANLIGIL	Transaction ID: SB29-0.017196
	Mailing Address 320 1ST ST SE	Date of Disbursement MM / DD / YYYY 11 / 19 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 884.15
	Purpose of Disbursement RECOUNT PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) RYAN CARNEY	Transaction ID: SB29-0.017197
	Mailing Address 320 1ST ST SE	Date of Disbursement MM / DD / YYYY 11 / 19 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 1590.17
	Purpose of Disbursement RECOUNT PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3467.34
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) GENEVIEVE CARTER <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017198 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 588.55
	Category/ Type
	Disbursement For:
B. Full Name (Last, First, Middle Initial) BENJAMIN J CASSIDY <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017199 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 857.59
	Category/ Type
	Disbursement For:
C. Full Name (Last, First, Middle Initial) ROBERT COUSINS <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017200 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 1088.17
	Category/ Type
	Disbursement For:

SUBTOTAL of Disbursements This Page (optional) ▶

2534.31

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) JARED CRAIGHEAD	Transaction ID: SB29-0.017180 Date of Disbursement 11 / 18 / 2010	
	Mailing Address 3605 GETTYSBURG PL		
	City JEFFERSON CITY State MO Zip Code 65109	Amount of Each Disbursement this Period	405.79
	Purpose of Disbursement RECOUNT TRAVEL		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		
B.	Full Name (Last, First, Middle Initial) JOHN R CRISCUOLO	Transaction ID: SB29-0.017201 Date of Disbursement 11 / 19 / 2010	
	Mailing Address 320 1ST ST SE		
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period	811.58
	Purpose of Disbursement RECOUNT PAYROLL		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		
C.	Full Name (Last, First, Middle Initial) ERICA CROCKER	Transaction ID: SB29-0.017202 Date of Disbursement 11 / 19 / 2010	
	Mailing Address 320 1ST ST SE		
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period	973.01
	Purpose of Disbursement RECOUNT PAYROLL		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶

2190.38

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) CALEB F CROSBY <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017203 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 3170.19
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) JORDAN N DAVIS <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017204 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 1250.32
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) JOHN J DESTEFANO <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017206 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 2391.86
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

6812.37

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) MARIANA DIEZ <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017207 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 675.65
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) RACHEL DRESEN <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017208 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 1193.95
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) THOMAS J DUNN <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017209 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 1025.26
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

2894.86

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) TRENT T EDWARDS</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement RECOUNT PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29-0.017210</p> <p>Date of Disbursement 11 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 1704.31</p>
<p>B. Full Name (Last, First, Middle Initial) GEOFFREY EMBLER</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement RECOUNT PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29-0.017211</p> <p>Date of Disbursement 11 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 2251.72</p>
<p>C. Full Name (Last, First, Middle Initial) THOMAS ERICKSON</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement RECOUNT PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29-0.017212</p> <p>Date of Disbursement 11 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 1248.76</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5204.79

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) GABRIELE FORSYTH	Transaction ID: SB29-0.017213 Date of Disbursement 11 / 19 / 2010	
	Mailing Address 320 1ST ST SE		
	City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement RECOUNT PAYROLL Candidate Name	Amount of Each Disbursement this Period 1502.29	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) JESSICA C FURST	Transaction ID: SB29-0.017218 Date of Disbursement 11 / 19 / 2010	
	Mailing Address 320 1ST ST SE		
	City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement RECOUNT PAYROLL Candidate Name	Amount of Each Disbursement this Period 2871.91	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) TIMOTHY M GARON	Transaction ID: SB29-0.017214 Date of Disbursement 11 / 19 / 2010	
	Mailing Address 320 1ST ST SE		
	City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement RECOUNT PAYROLL Candidate Name	Amount of Each Disbursement this Period 1771.10	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	6145.30
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) STEPHANIE GENCO	Transaction ID: SB29-0.017181 Date of Disbursement
	Mailing Address 320 1ST ST SE	<input type="text" value="11"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement RECOUNT TRAVEL	<input type="text" value="109.58"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) STEPHANIE GENCO	Transaction ID: SB29-0.017215 Date of Disbursement
	Mailing Address 320 1ST ST SE	<input type="text" value="11"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement RECOUNT PAYROLL	<input type="text" value="1158.67"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ASHLEY GODWIN	Transaction ID: SB29-0.017216 Date of Disbursement
	Mailing Address 320 1ST ST SE	<input type="text" value="11"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement RECOUNT PAYROLL	<input type="text" value="1162.78"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2431.03"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) BRANDON M GRAVLEY <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017217 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 1152.28
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) GEORGE G GRIFFIN <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017219 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 2001.59
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) ORRIN L HARRISON <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017220 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 2973.28
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

6127.15

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ELIZABETH HAURY	Transaction ID: SB29-0.017182 Date of Disbursement 11 / 18 / 2010
	Mailing Address 5733 SILVERTON RD NE	Amount of Each Disbursement this Period 152.28
	City SALEM State OR Zip Code 97305	
	Purpose of Disbursement RECOUNT TRAVEL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) HEATHER HENDERSON	Transaction ID: SB29-0.017224 Date of Disbursement 11 / 19 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 1020.36
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement RECOUNT PAYROLL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ROBERT P HONOLD	Transaction ID: SB29-0.017225 Date of Disbursement 11 / 19 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 2187.05
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement RECOUNT PAYROLL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3359.69
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) CURTIS ISAKSON <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017222 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 849.45
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) JESSICA JAMES <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017223 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 710.08
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) JAMES R JETTON <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017226 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 1150.50
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

2710.03

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) TODD R JOHNSON <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017227 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 1388.03
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) MARY E KAHLSTORF <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017228 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 991.01
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) MICHAEL R KAPLAN <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017229 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 754.65
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

3133.69

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) NICHOLAS KARELLAS	Transaction ID: SB29-0.017230 Date of Disbursement
	Mailing Address 320 1ST ST SE	<input type="text" value="11"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement RECOUNT PAYROLL	<input type="text" value="994.03"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) DEBORAH KELLER	Transaction ID: SB29-0.017183 Date of Disbursement
	Mailing Address 216 MARYLAND AVE NE APT105	<input type="text" value="11"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement RECOUNT TRAVEL	<input type="text" value="558.21"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ALEXANDER LAWHON	Transaction ID: SB29-0.017231 Date of Disbursement
	Mailing Address 320 1ST ST SE	<input type="text" value="11"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement RECOUNT PAYROLL	<input type="text" value="2173.97"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3726.21"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) SHAUN LEDGERWOOD	Transaction ID: SB29-0.017232
	Mailing Address 320 1ST ST SE	Date of Disbursement MM / DD / YYYY 11 / 19 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 1479.02
	Purpose of Disbursement RECOUNT PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ANNA LEE	Transaction ID: SB29-0.017184
	Mailing Address 320 1ST ST SE	Date of Disbursement MM / DD / YYYY 11 / 18 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 856.80
	Purpose of Disbursement RECOUNT TRAVEL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) PAUL A LINDSAY	Transaction ID: SB29-0.017233
	Mailing Address 320 1ST ST SE	Date of Disbursement MM / DD / YYYY 11 / 19 / 2010
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 1637.86
	Purpose of Disbursement RECOUNT PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3973.68
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) SAMUEL LOEWNER	Transaction ID: SB29-0.017234 Date of Disbursement 11 / 19 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 394.08
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement RECOUNT PAYROLL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) REBECCA MARK	Transaction ID: SB29-0.017235 Date of Disbursement 11 / 19 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 989.94
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement RECOUNT PAYROLL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) SALVATORE MAZZOLA	Transaction ID: SB29-0.017236 Date of Disbursement 11 / 19 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 1630.12
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement RECOUNT PAYROLL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	3014.14
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) SALLY D MCALLISTER <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017237 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 1907.58
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) BROCK MCCLEARY <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017238 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 1853.18
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) KEVIN W MCGRANN <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017239 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 513.91
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

4274.67

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) BRANDON MILLS	Transaction ID: SB29-0.017240 Date of Disbursement																			
	Mailing Address 320 1ST ST SE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	9	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	1	9	/	2	0	1	0												
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																			
	Purpose of Disbursement RECOUNT PAYROLL	<table border="1"><tr><td>845.95</td></tr></table>	845.95																		
845.95																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) GEORGE NASSAR	Transaction ID: SB29-0.017241 Date of Disbursement																			
	Mailing Address 320 1ST ST SE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	9	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	1	9	/	2	0	1	0												
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																			
	Purpose of Disbursement RECOUNT PAYROLL	<table border="1"><tr><td>794.36</td></tr></table>	794.36																		
794.36																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) JENNIFER NELSON	Transaction ID: SB29-0.017242 Date of Disbursement																			
	Mailing Address 320 1ST ST SE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	9	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	1	9	/	2	0	1	0												
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																			
	Purpose of Disbursement RECOUNT PAYROLL	<table border="1"><tr><td>1035.46</td></tr></table>	1035.46																		
1035.46																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>2675.77</td></tr></table>	2675.77
2675.77		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) JOHN D NEUMANN	Transaction ID: SB29-0.017243 Date of Disbursement
	Mailing Address 320 1ST ST SE	<input type="text" value="11"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement RECOUNT PAYROLL	<input type="text" value="1980.93"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) BENJAMIN M OTTENHOFF	Transaction ID: SB29-0.017244 Date of Disbursement
	Mailing Address 320 1ST ST SE	<input type="text" value="11"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement RECOUNT PAYROLL	<input type="text" value="1336.86"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) LIBRADO PADILLA	Transaction ID: SB29-0.017245 Date of Disbursement
	Mailing Address 320 1ST ST SE	<input type="text" value="11"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement RECOUNT PAYROLL	<input type="text" value="1561.50"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4879.29"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) LINDSAY PERKINSON <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017246 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 1019.89
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) THOMAS PREWITT <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017247 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 900.82
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) JOHN R RANDALL <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017248 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 2135.37
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

4056.08

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) BRANDON RAY <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017249 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 678.49
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) CELIA RILEY <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017250 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 1058.72
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) JESSE H ROMAN <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017251 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 661.83
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	2399.04
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) MARY RUNK <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017252 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 757.53
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) JARROD SCHLENKER <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT TRAVEL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017185 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 8 / 2 0 1 0
	Amount of Each Disbursement this Period 23.83
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) JARROD SCHLENKER <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017253 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 1006.27
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ►

1787.63

TOTAL This Period (last page this line number only) ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) JOSEPH G SCIARRINO	Transaction ID: SB29-0.017254 Date of Disbursement 11 / 19 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 889.77
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement RECOUNT PAYROLL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) ANDREW SERE	Transaction ID: SB29-0.017255 Date of Disbursement 11 / 19 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 1447.85
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement RECOUNT PAYROLL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) DONALD P SEYMOUR, JR	Transaction ID: SB29-0.017256 Date of Disbursement 11 / 19 / 2010
	Mailing Address 320 1ST ST SE	Amount of Each Disbursement this Period 451.31
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement RECOUNT PAYROLL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

2788.93

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) JENNIFER S SHEFFIELD <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017257 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 2532.48
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) MIKE S SHIELDS <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017258 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 3344.35
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) KENNETH P SPAIN <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017259 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 2592.38
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	8469.21
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) SAVANNAH R STEELE <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017260 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 788.11
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) KAYLA SULZER <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT TRAVEL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017186 Date of Disbursement 11 / 18 / 2010
	Amount of Each Disbursement this Period 208.79
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) KAYLA SULZER <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017261 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 673.06
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

1669.96

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) JONATHAN THOMPSON</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement RECOUNT PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29-0.017262</p> <p>Date of Disbursement 11 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 897.27</p>
<p>B. Full Name (Last, First, Middle Initial) HOLLY THURMOND</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement RECOUNT PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29-0.017263</p> <p>Date of Disbursement 11 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 673.07</p>
<p>C. Full Name (Last, First, Middle Initial) ELIZABETH W VERRILL</p> <p>Mailing Address 320 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement RECOUNT PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29-0.017267</p> <p>Date of Disbursement 11 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 3316.41</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4886.75

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) MARY ANN VOIGT <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017268 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 1279.90
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) BRIAN O WALSH <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017269 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 2979.04
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) CAITLIN WOHLFARTH <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017270 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 921.47
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	5180.41
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) JOE N WYNN, JR <hr/> Mailing Address 320 1ST ST SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement RECOUNT PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017271 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 1030.12
B.	Full Name (Last, First, Middle Initial) BRACEWELL & GIULIANI LLP <hr/> Mailing Address 1251 AVENUE OF THE AMERICAS 49TH FLOOR <hr/> City NEW YORK State NY Zip Code 10020-1104 <hr/> Purpose of Disbursement RECOUNT LEGAL CONSULTING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.016850 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 1000.00
C.	Full Name (Last, First, Middle Initial) COMPTROLLER OF MARYLAND <hr/> Mailing Address STATE INCOME TAX BLDG <hr/> City ANNAPOLIS State MD Zip Code 21411 <hr/> Purpose of Disbursement RECOUNT PAYROLL TAXES Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017274 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 330.81

SUBTOTAL of Disbursements This Page (optional) ▶

2360.93

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DC TREASURER	Transaction ID: SB29-0.017272 Date of Disbursement
	Mailing Address PO BOX 37630	<input type="text" value="11"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20013	Amount of Each Disbursement this Period
	Purpose of Disbursement RECOUNT PAYROLL TAXES	<input type="text" value="4841.09"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) DC TREASURER	Transaction ID: SB29-0.017273 Date of Disbursement
	Mailing Address PO BOX 1582	<input type="text" value="11"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20013	Amount of Each Disbursement this Period
	Purpose of Disbursement RECOUNT PAYROLL TAXES	<input type="text" value="74.25"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) GAMMAGE AND BURNHAM	Transaction ID: SB29-0.016873 Date of Disbursement
	Mailing Address 2 NORTH CENTRAL AVE 15TH FLOOR	<input type="text" value="11"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City PHOENIX State AZ Zip Code 85004-4470	Amount of Each Disbursement this Period
	Purpose of Disbursement RECOUNT LEGAL CONSULTING	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5915.34"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MAGELLAN DATA AND MAPPING	Transaction ID: SB29-0.016851 Date of Disbursement 10 / 29 / 2010	
	Mailing Address 1685 BOXELDER ST STE 300		
	City LOUISVILLE State CO Zip Code 80027	Amount of Each Disbursement this Period 1000.00	
	Purpose of Disbursement RECOUNT LEGAL CONSULTING		
	Candidate Name	Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) TRANSAMERICA RETIREMENT SERVICES	Transaction ID: SB29-0.017277 Date of Disbursement 11 / 19 / 2010	
	Mailing Address PO BOX 30368		
	City LOS ANGELES State CA Zip Code 90099-9208	Amount of Each Disbursement this Period 11491.00	
	Purpose of Disbursement RECOUNT RETIREMENT SERVICES		
	Candidate Name	Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) US DEPARTMENT OF TREASURY	Transaction ID: SB29-0.017275 Date of Disbursement 11 / 19 / 2010	
	Mailing Address 1500 PENNSYLVANIA AVE NW		
	City WASHINGTON State DC Zip Code 20220	Amount of Each Disbursement this Period 42510.71	
	Purpose of Disbursement RECOUNT PAYROLL TAXES		
	Candidate Name	Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

55001.71

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) VIRGINIA DEPT OF TAXATION <hr/> Mailing Address PO BOX 1411 <hr/> City RICHMOND State VA Zip Code 23212 <hr/> Purpose of Disbursement RECOUNT PAYROLL TAXES Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017276 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 3395.89
B. Full Name (Last, First, Middle Initial) ILLINOIS GOP FEDERAL RECOUNT FUND <hr/> Mailing Address PO BOX 78 <hr/> City SPRINGFIELD State IL Zip Code 62705 <hr/> Purpose of Disbursement TRANSFER-RECOUNT Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-0.017096 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 1 0
	Amount of Each Disbursement this Period 5000.00

SUBTOTAL of Disbursements This Page (optional) ►

8395.89

TOTAL This Period (last page this line number only) ►

222640.31

SCHEDULE C (FEC Form 3X)

Use separate schedule(s)
for each category of the
Detailed Summary Page

LOANS

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Transaction ID: SCHEDC_1

LOAN SOURCE Full Name (Last, First, Middle Initial) WACHOVIA	Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1753 PINNACLE DRIVE	
City MCLEAN State VA ZIP Code 22102	

Original Amount of Loan 12000000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 12000000.00
--	------------------------------------	--

TERMS

Date Incurred MM DD YY YY 09 14 20 10	Date Due 09/14/2011	Interest Rate 0.0000 % (apr)	Secured: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
---	------------------------	---------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional)	<input style="width: 100%;" type="text" value="1200000.00"/>
TOTALS This Period (last page in this line only)	<input style="width: 100%;" type="text" value="1200000.00"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C-1 (FEC Form 3X) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Federal Election Commission, Washington, D.C. 20463

 Supplementary for
 Information found on
 Page 3012 / 3187
 of Schedule C

Name of Committee (in Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER C00075820	
Back Ref ID: SCHEDC 1			
LENDING INSTITUTION (LENDER) Full Name WACHOVIA		Amount of Loan 20000000.00	Interest Rate (APR) 0.00000 %
Mailing Address 1753 PINNACLE DRIVE		Date Incurred or Established 09 14 2010	
City MCLEAN	State VA	Zip Code 22102	Date Due 09/14/2011
A. Has loan been restructured? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes		If yes, date originally incurred : 09 30 2008	
B. If line of credit, Amount of this Draw: 12000000.00		Total Outstanding balance : 12000000.00	
C. Are other parties secondarily liable for the debt incurred? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Endorsers and guarantors must be reported on Sch. C)			
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, specify: <u>CURRENT AND FUTURE ASSETS</u>		What is the value of this collateral? 20000000.00	
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____		Does the lender have a perfected security interest in it? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes What is the estimated value? 0.00	
A depository account must be established pursuant to 11 CFR 100.82 and 100.142. Date account established: 10 02 2008		Location of account WACHOVIA Address: 1753 PINNACLE DRIVE City, State, Zip: MCLEAN VA 22102	
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment. MEMO NOTE ON INTEREST: INTEREST RATE IS LIBOR + 1.75%. SOFTWARE DOES NOT SUPPORT TEXT IN THE FIELD			
G. COMMITTEE TREASURER Typed Name KEITH A. DAVIS Signature _____		DATE 10 19 2010	
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of this loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.			
AUTHORIZED REPRESENTATIVE Typed Name KIMBERLY P. ARMSTRONG Signature _____		DATE 10 19 2010 Title SR VICE-PRESIDENT	

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Expenditure MEDIA		Category/ Type

Name of Federal Candidate supported or Opposed by expenditure:
LINCOLN EDWARD DAVIS

Calendar Year-To-Date Per Election for Office Sought	532940.67
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
92552.19

Transaction ID: SE24-0.019278

Office Sought: House State: TN
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Expenditure MEDIA		Category/ Type

Name of Federal Candidate supported or Opposed by expenditure:
FREDERICK C BOUCHER

Calendar Year-To-Date Per Election for Office Sought	814117.53
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
180422.65

Transaction ID: SE24-0.019277

Office Sought: House State: VA
 Senate District: 09
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	272974.84
(b) SUBTOTAL of Unitemized Independent Expenditures	[Empty Box]
(c) TOTAL Independent Expenditures	[Empty Box]

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
BARON PAUL HILL

Calendar Year-To-Date Per Election for Office Sought	851111.58
---	-----------

Date

M M 1 0	D D 1 4	Y Y Y Y 2 0 1 0
------------	------------	--------------------

Amount

183804.33

Transaction ID: SE24-0.019276

Office Sought: House State: IN
 Senate District: 09
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
CHRISTOPHER P CARNEY

Calendar Year-To-Date Per Election for Office Sought	749907.30
---	-----------

Date

M M 1 0	D D 1 4	Y Y Y Y 2 0 1 0
------------	------------	--------------------

Amount

192795.31

Transaction ID: SE24-0.019274

Office Sought: House State: PA
 Senate District: 10
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	376599.64
(b) SUBTOTAL of Unitemized Independent Expenditures	[Empty Box]
(c) TOTAL Independent Expenditures	[Empty Box]

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date

M M 1 2	D D 0 2	Y Y Y Y 2 0 1 0
------------	------------	--------------------

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Mailing Address
815 SLATERS LANE

Amount
152950.41

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019188

Purpose of Expenditure Category/Type
MEDIA

Office Sought: House State: IL
 Senate District: 17
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
PHILIP G HARE

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
896108.86

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Mailing Address
815 SLATERS LANE

Amount
137299.29

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019187

Purpose of Expenditure Category/Type
MEDIA

Office Sought: House State: WI
 Senate District: 07
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
JULIE LASSA

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
852694.10

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	290249.70
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/
MEDIA Type

Name of Federal Candidate supported or Opposed by expenditure:
MICHAEL A. OLIVERIO, II

Calendar Year-To-Date Per Election for Office Sought 722606.06

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
163558.08

Transaction ID: SE24-0.019186

Office Sought: House State: WV
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/
MEDIA Type

Name of Federal Candidate supported or Opposed by expenditure:
DENNIS HECK

Calendar Year-To-Date Per Election for Office Sought 1245269.79

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
280604.04

Transaction ID: SE24-0.019185

Office Sought: House State: WA
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	444162.12
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
THOMAS STUART PRICE PERRIELLO

Calendar Year-To-Date Per Election for Office Sought
1006200.34

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
154146.23

Transaction ID: SE24-0.019184

Office Sought: House State: VA
 Senate District: 05
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
GLENN CARLYLE NYE, III

Calendar Year-To-Date Per Election for Office Sought
424659.57

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
114530.79

Transaction ID: SE24-0.019183

Office Sought: House State: VA
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	268677.02
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date
M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
CIRO D RODRIGUEZ

Calendar Year-To-Date Per Election for Office Sought 511542.48

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
223731.35

Transaction ID: SE24-0.019182

Office Sought: House State: TX
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
CHET EDWARDS

Calendar Year-To-Date Per Election for Office Sought 401438.60

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
72011.95

Transaction ID: SE24-0.019181

Office Sought: House State: TX
 Senate District: 17
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	295743.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
ROY BRASFIELD HERRON

Calendar Year-To-Date Per Election for Office Sought 766189.98

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
130368.12

Transaction ID: SE24-0.019180

Office Sought: House State: TN
 Senate District: 08
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
STEVEN L KAGEN

Calendar Year-To-Date Per Election for Office Sought 410601.65

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
79116.05

Transaction ID: SE24-0.019179

Office Sought: House State: WI
 Senate District: 08
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	209484.17
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
STEPHANIE M HERSETH SANDLIN

Calendar Year-To-Date Per Election for Office Sought 726769.70

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
195123.30

Transaction ID: SE24-0.019178

Office Sought: House State: SD
 Senate District: 00
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
JOHN MCKEE SPRATT, JR

Calendar Year-To-Date Per Election for Office Sought 1007843.19

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
179513.69

Transaction ID: SE24-0.019177

Office Sought: House State: SC
 Senate District: 05
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	374636.99
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Mailing Address
815 SLATERS LANE

Amount
42223.21

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019165

Purpose of Expenditure Category/Type
MEDIA

Office Sought: House State: NC
 Senate District: 07
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
MIKE MCINTYRE

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
390403.02

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Mailing Address
815 SLATERS LANE

Amount
47465.23

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019164

Purpose of Expenditure Category/Type
MEDIA

Office Sought: House State: NY
 Senate District: 24
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
MICHAEL A. ARCURI

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
438320.54

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	89688.44
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
SCOTT MURPHY

Calendar Year-To-Date Per Election for Office Sought

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount

Transaction ID: SE24-0.019163

Office Sought: House State: NY
 Senate District: 20
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
HARRY TEAGUE

Calendar Year-To-Date Per Election for Office Sought

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount

Transaction ID: SE24-0.019162

Office Sought: House State: NM
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text" value="330654.99"/>
(b) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
MARTIN HEINRICH

Calendar Year-To-Date Per Election for Office Sought 549013.27

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
144694.65

Transaction ID: SE24-0.019161

Office Sought: House State: NM
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
CAROL SHEA-PORTER

Calendar Year-To-Date Per Election for Office Sought 1025398.03

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
323492.64

Transaction ID: SE24-0.019159

Office Sought: House State: NH
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	468187.29
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Mailing Address
815 SLATERS LANE

Amount
27996.43

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019158

Purpose of Expenditure
MEDIA

Category/
Type

Office Sought: House State: NJ
 Senate District: 03
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
JOHN H ADLER

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 222583.49

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Mailing Address
815 SLATERS LANE

Amount
379671.71

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019157

Purpose of Expenditure
MEDIA

Category/
Type

Office Sought: House State: NV
 Senate District: 03
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
DINA TITUS

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 1091498.21

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	407668.14
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
IKE SKELTON

Calendar Year-To-Date Per Election for Office Sought 1234362.16

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
247121.91

Transaction ID: SE24-0.019156

Office Sought: House State: MO
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
GENE TAYLOR

Calendar Year-To-Date Per Election for Office Sought 341817.09

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
138852.50

Transaction ID: SE24-0.019155

Office Sought: House State: MS
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	385974.41
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
ANN MCLANE KUSTER

Calendar Year-To-Date Per Election for Office Sought 424112.61

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
128306.68

Transaction ID: SE24-0.019160

Office Sought: House State: NH
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
TRAVIS W CHILDERS

Calendar Year-To-Date Per Election for Office Sought 883315.28

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
267813.11

Transaction ID: SE24-0.019154

Office Sought: House State: MS
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	396119.79
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
TIMOTHY J WALZ

Calendar Year-To-Date Per Election for Office Sought 527312.23

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
148145.20

Transaction ID: SE24-0.019153

Office Sought: House State: MN
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
MARK HAMILTON SCHAUER

Calendar Year-To-Date Per Election for Office Sought 1468368.98

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
210823.07

Transaction ID: SE24-0.019152

Office Sought: House State: MI
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	358968.27
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
GARY J MCDOWELL

Calendar Year-To-Date Per Election for Office Sought 1084651.42

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
207409.40

Transaction ID: SE24-0.019151

Office Sought: House State: MI
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
FRANK M KRATOVIL, JR

Calendar Year-To-Date Per Election for Office Sought 839714.82

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
337024.05

Transaction ID: SE24-0.019150

Office Sought: House State: MD
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	544433.45
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
WILLIAM RICHARD KEATING

Calendar Year-To-Date Per Election for Office Sought 733820.18

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
275470.60

Transaction ID: SE24-0.019149

Office Sought: House State: MA
 Senate District: 10
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
A. B. CHANDLER, III

Calendar Year-To-Date Per Election for Office Sought 588764.28

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
79336.70

Transaction ID: SE24-0.019148

Office Sought: House State: KY
 Senate District: 06
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	354807.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Mailing Address
815 SLATERS LANE

Amount
66483.09

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019146

Purpose of Expenditure Category/Type
MEDIA

Office Sought: House State: IN
 Senate District: 02
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
JOSEPH S DONNELLY

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
562969.31

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Mailing Address
815 SLATERS LANE

Amount
52835.28

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019145

Purpose of Expenditure Category/Type
MEDIA

Office Sought: House State: IL
 Senate District: 14
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
WILLIAM G FOSTER

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
338166.62

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	119318.37
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
DEBORAH HALVORSON

Calendar Year-To-Date Per Election for Office Sought 237398.24

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
33040.80

Transaction ID: SE24-0.019144

Office Sought: House State: IL
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
MARK CRITZ

Calendar Year-To-Date Per Election for Office Sought 545396.48

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
245577.64

Transaction ID: SE24-0.019176

Office Sought: House State: PA
 Senate District: 12
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	278618.44
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
PAUL E. KANJORSKI

Calendar Year-To-Date Per Election for Office Sought **901831.32**

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
125292.94

Transaction ID: SE24-0.019175

Office Sought: House State: PA
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
PATRICK J MURPHY

Calendar Year-To-Date Per Election for Office Sought **269965.32**

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
37888.37

Transaction ID: SE24-0.019174

Office Sought: House State: PA
 Senate District: 08
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	163181.31
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
BRYAN ROY LENTZ

Calendar Year-To-Date Per Election for Office Sought	337427.07
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
45738.21

Transaction ID: SE24-0.019173

Office Sought: House State: PA
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
KATHLEEN ANN DAHLKEMPER

Calendar Year-To-Date Per Election for Office Sought	446804.92
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
49163.98

Transaction ID: SE24-0.019172

Office Sought: House State: PA
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	94902.19
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
KURT SCHRADER

Calendar Year-To-Date Per Election for Office Sought 746728.79

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
215647.64

Transaction ID: SE24-0.019171

Office Sought: House State: OR
 Senate District: 05
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
ZACHARY T SPACE

Calendar Year-To-Date Per Election for Office Sought 1124970.20

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
520952.02

Transaction ID: SE24-0.019170

Office Sought: House State: OH
 Senate District: 18
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	736599.66
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
JOHN A BOCCIERI

Calendar Year-To-Date Per Election for Office Sought
1262311.08

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
397721.47

Transaction ID: SE24-0.019169

Office Sought: House State: OH
 Senate District: 16
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
CHARLES A WILSON

Calendar Year-To-Date Per Election for Office Sought
337615.55

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
84843.55

Transaction ID: SE24-0.019167

Office Sought: House State: OH
 Senate District: 06
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	482565.02
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Mailing Address
815 SLATERS LANE

Amount
209253.89

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019166

Purpose of Expenditure Category/Type
MEDIA

Office Sought: House State: ND
 Senate District: 00
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
EARL R. POMEROY

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
992623.58

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Mailing Address
815 SLATERS LANE

Amount
55412.18

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019143

Purpose of Expenditure Category/Type
MEDIA

Office Sought: House State: IL
 Senate District: 10
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
DANIEL JOSEPH SEALS

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
371211.60

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	264666.07
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
JIM MARSHALL

Calendar Year-To-Date Per Election for Office Sought
392921.61

Date
10 / 14 / 2010

Amount
55240.04
Transaction ID: SE24-0.019142

Office Sought: House State: GA
 Senate District: 08
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
SANFORD D BISHOP, JR

Calendar Year-To-Date Per Election for Office Sought
371153.39

Date
10 / 14 / 2010

Amount
83722.73
Transaction ID: SE24-0.019141

Office Sought: House State: GA
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	138962.77
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date 12 / 02 / 2010

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Mailing Address
815 SLATERS LANE

Amount
190222.80

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019140

Purpose of Expenditure Category/Type
MEDIA

Office Sought: House State: FL
 Senate District: 24
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
SUZANNE KOSMAS

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
588989.37

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Mailing Address
815 SLATERS LANE

Amount
190125.75

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019139

Purpose of Expenditure Category/Type
MEDIA

Office Sought: House State: FL
 Senate District: 08
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
ALAN MARK GRAYSON

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
593229.86

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	380348.55
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
ALLEN F. BOYD, JR.

Calendar Year-To-Date Per Election for Office Sought **698576.56**

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
132873.56

Transaction ID: SE24-0.019138

Office Sought: House State: FL
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
BETSY MARKEY

Calendar Year-To-Date Per Election for Office Sought **840396.20**

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
388394.42

Transaction ID: SE24-0.019137

Office Sought: House State: CO
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	521267.98
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
JOHN TONY SALAZAR

Calendar Year-To-Date Per Election for Office Sought 763073.31

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
273460.25

Transaction ID: SE24-0.019136

Office Sought: House State: CO
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
JERRY MCNERNEY

Calendar Year-To-Date Per Election for Office Sought 357841.92

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
49495.90

Transaction ID: SE24-0.019135

Office Sought: House State: CA
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	322956.15
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
HARRY E. MITCHELL

Calendar Year-To-Date Per Election for Office Sought **1145282.64**

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
353218.80

Transaction ID: SE24-0.019134

Office Sought: House State: AZ
 Senate District: 05
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
ANN KIRKPATRICK

Calendar Year-To-Date Per Election for Office Sought **1310874.40**

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
248698.21

Transaction ID: SE24-0.019133

Office Sought: House State: AZ
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	601917.01
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
CHAD CAUSEY

Calendar Year-To-Date Per Election for Office Sought 842212.55

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
232807.91

Transaction ID: SE24-0.019132

Office Sought: House State: AR
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
BOBBY NEAL BRIGHT, SR

Calendar Year-To-Date Per Election for Office Sought 1059422.59

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
185814.70

Transaction ID: SE24-0.019131

Office Sought: House State: AL
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	418622.61
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
LINCOLN EDWARD DAVIS

Calendar Year-To-Date Per Election for Office Sought
532940.67

Date
10 / 14 / 2010

Amount
176129.30

Transaction ID: SE24-0.019130

Office Sought: House State: TN
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
AMERICAN VIEWPOINT INC

Mailing Address
300 N LEE ST
STE 400

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
SURVEY RESEARCH

Name of Federal Candidate supported or Opposed by expenditure:
CHRISTOPHER P CARNEY

Calendar Year-To-Date Per Election for Office Sought
749907.30

Date
10 / 15 / 2010

Amount
11500.00

Transaction ID: SE24-0.019444

Office Sought: House State: PA
 Senate District: 10
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	187629.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date 12 / 02 / 2010

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
ANTHEM MEDIA INC

Mailing Address
5524 BEE CAVES RD
STE B5

City State Zip Code
AUSTIN TX 78746

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
TRAVIS W CHILDERS

Calendar Year-To-Date Per Election for Office Sought **883315.28**

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
16560.00

Transaction ID: SE24-0.019388

Office Sought: House State: MS
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
ANTHEM MEDIA INC

Mailing Address
5524 BEE CAVES RD
STE B5

City State Zip Code
AUSTIN TX 78746

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
CHET EDWARDS

Calendar Year-To-Date Per Election for Office Sought **401438.60**

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
19878.00

Transaction ID: SE24-0.019407

Office Sought: House State: TX
 Senate District: 17
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	36438.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
ANTHEM MEDIA INC

Mailing Address
5524 BEE CAVES RD
STE B5

City State Zip Code
AUSTIN TX 78746

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
CHET EDWARDS

Calendar Year-To-Date Per Election for Office Sought 401438.60

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
3417.00

Transaction ID: SE24-0.019408

Office Sought: House State: TX
 Senate District: 17
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
ANTHEM MEDIA INC

Mailing Address
5524 BEE CAVES RD
STE B5

City State Zip Code
AUSTIN TX 78746

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
CIRO D RODRIGUEZ

Calendar Year-To-Date Per Election for Office Sought 511542.48

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
18685.00

Transaction ID: SE24-0.019410

Office Sought: House State: TX
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	22102.00
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
ANTHEM MEDIA INC

Mailing Address
5524 BEE CAVES RD
STE B5

City State Zip Code
AUSTIN TX 78746

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
CIRO D RODRIGUEZ

Calendar Year-To-Date Per Election for Office Sought **511542.48**

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
4000.00

Transaction ID: SE24-0.019412

Office Sought: House State: TX
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
ANTHEM MEDIA INC

Mailing Address
5524 BEE CAVES RD
STE B5

City State Zip Code
AUSTIN TX 78746

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
CIRO D RODRIGUEZ

Calendar Year-To-Date Per Election for Office Sought **511542.48**

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
3665.00

Transaction ID: SE24-0.019413

Office Sought: House State: TX
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	7665.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
ANTHEM MEDIA INC

Mailing Address
5524 BEE CAVES RD
STE B5

City State Zip Code
AUSTIN TX 78746

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
MICHAEL A. OLIVERIO, II

Calendar Year-To-Date Per Election for Office Sought 722606.06

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
18578.00

Transaction ID: SE24-0.019416

Office Sought: House State: WV
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
AMERICAN VIEWPOINT INC

Mailing Address
300 N LEE ST
STE 400

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
SURVEY RESEARCH

Name of Federal Candidate supported or Opposed by expenditure:
TIMOTHY J WALZ

Calendar Year-To-Date Per Election for Office Sought 527312.23

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
11500.00

Transaction ID: SE24-0.019383

Office Sought: House State: MN
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	30078.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date 1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
AMERICAN VIEWPOINT INC

Mailing Address
300 N LEE ST
STE 400

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
SURVEY RESEARCH

Name of Federal Candidate supported or Opposed by expenditure:
MARK CRITZ

Calendar Year-To-Date Per Election for Office Sought 545396.48

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
15000.00

Transaction ID: SE24-0.019400

Office Sought: House State: PA
 Senate District: 12
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
AMERICAN VIEWPOINT INC

Mailing Address
300 N LEE ST
STE 400

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
SURVEY RESEARCH

Name of Federal Candidate supported or Opposed by expenditure:
DENNIS HECK

Calendar Year-To-Date Per Election for Office Sought 1245269.79

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
11500.00

Transaction ID: SE24-0.019414

Office Sought: House State: WA
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	26500.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
AYRES MCHENRY AND ASSOCIATES

Mailing Address
112 N ALFRED ST

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
SURVEY RESEARCH

Name of Federal Candidate supported or Opposed by expenditure:
IKE SKELTON

Calendar Year-To-Date Per Election for Office Sought
1234362.16

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
11500.00

Transaction ID: SE24-0.019369

Office Sought: House State: MO
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
AYRES MCHENRY AND ASSOCIATES

Mailing Address
112 N ALFRED ST

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
SURVEY RESEARCH

Name of Federal Candidate supported or Opposed by expenditure:
JIM MARSHALL

Calendar Year-To-Date Per Election for Office Sought
392921.61

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
11500.00

Transaction ID: SE24-0.019381

Office Sought: House State: GA
 Senate District: 08
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	23000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	<input style="width:100%;" type="text"/>
(c) TOTAL Independent Expenditures	<input style="width:100%;" type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
AYRES MCHENRY AND ASSOCIATES

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Mailing Address
112 N ALFRED ST

Amount
15000.00

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019418

Purpose of Expenditure Category/Type
SURVEY RESEARCH

Office Sought: House State: VA
 Senate District: 02
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
GLENN CARLYLE NYE, III

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
424659.57

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
AYRES MCHENRY AND ASSOCIATES

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Mailing Address
112 N ALFRED ST

Amount
15000.00

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019439

Purpose of Expenditure Category/Type
SURVEY RESEARCH

Office Sought: House State: GA
 Senate District: 02
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
SANFORD D BISHOP, JR

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
371153.39

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	30000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
AYRES MCHENRY AND ASSOCIATES

Mailing Address
112 N ALFRED ST

City ALEXANDRIA	State VA	Zip Code 22314
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Purpose of Expenditure SURVEY RESEARCH	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
GENE TAYLOR

Calendar Year-To-Date Per Election for Office Sought	341817.09
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
15000.00

Transaction ID: SE24-0.019447

Office Sought: House State: MS
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
BASELICE AND ASSOCIATES INC

Mailing Address
4131 SPICEWOOD SPRINGS RD
STE O-2

City AUSTIN	State TX	Zip Code 78759
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Purpose of Expenditure SURVEY RESEARCH	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
TRAVIS W CHILDERS

Calendar Year-To-Date Per Election for Office Sought	883315.28
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
10500.00

Transaction ID: SE24-0.019387

Office Sought: House State: MS
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	25500.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
DMM MEDIA LLC

Mailing Address
3299 K ST NW
SUITE 200

City WASHINGTON	State DC	Zip Code 20007
--------------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
IKE SKELTON

Calendar Year-To-Date Per Election for Office Sought	1234362.16
---	------------

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
19824.00

Transaction ID: SE24-0.019368

Office Sought: House State: MO
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
DMM MEDIA LLC

Mailing Address
3299 K ST NW
SUITE 200

City WASHINGTON	State DC	Zip Code 20007
--------------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
TIMOTHY J WALZ

Calendar Year-To-Date Per Election for Office Sought	527312.23
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
19842.00

Transaction ID: SE24-0.019384

Office Sought: House State: MN
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	39666.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
DMM MEDIA LLC

Mailing Address
3299 K ST NW
SUITE 200

City	State	Zip Code
WASHINGTON	DC	20007

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
DINA TITUS

Calendar Year-To-Date Per Election for Office Sought	1091498.21
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Date

M M	/	D D	/	Y Y Y Y
1 0		1 5		2 0 1 0

Amount

19987.00

Transaction ID: SE24-0.019391

Office Sought: House State: NV
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
DMM MEDIA LLC

Mailing Address
3299 K ST NW
SUITE 200

City	State	Zip Code
WASHINGTON	DC	20007

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
SCOTT MURPHY

Calendar Year-To-Date Per Election for Office Sought	777925.03
---	-----------

Date

M M	/	D D	/	Y Y Y Y
1 0		1 5		2 0 1 0

Amount

19742.00

Transaction ID: SE24-0.019426

Office Sought: House State: NY
 Senate District: 20
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	39729.00
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date

M M	/	D D	/	Y Y Y Y
1 2		0 2		2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
FABRIZIO MCLAUGHLIN AND ASSOCIATES INC

Mailing Address
915 KING ST
2ND FL

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
SURVEY RESEARCH

Name of Federal Candidate supported or Opposed by expenditure:
KATHLEEN ANN DAHLKEMPER

Calendar Year-To-Date Per Election for Office Sought 446804.92

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
11500.00

Transaction ID: SE24-0.019393

Office Sought: House State: PA
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
GREENER AND HOOK LLC

Mailing Address
2101 WILSON BLVD
STE 402

City State Zip Code
ARLINGTON VA 22201

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
JOHN A BOCCIERI

Calendar Year-To-Date Per Election for Office Sought 1262311.08

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
17728.35

Transaction ID: SE24-0.019373

Office Sought: House State: OH
 Senate District: 16
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	29228.35
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
HILL RESEARCH CONSULTANTS

Mailing Address
PO BOX 3290

City AUBURN	State AL	Zip Code 36831
----------------	-------------	-------------------

Purpose of Expenditure SURVEY RESEARCH	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
STEPHANIE M HERSETH SANDLIN

Calendar Year-To-Date Per Election for Office Sought	726769.70
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
11500.00
Transaction ID: SE24-0.019405

Office Sought: House State: SD
 Senate District: 00
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
HILL RESEARCH CONSULTANTS

Mailing Address
PO BOX 3290

City AUBURN	State AL	Zip Code 36831
----------------	-------------	-------------------

Purpose of Expenditure SURVEY RESEARCH	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
CHET EDWARDS

Calendar Year-To-Date Per Election for Office Sought	401438.60
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
11500.00
Transaction ID: SE24-0.019409

Office Sought: House State: TX
 Senate District: 17
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	23000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
HILL RESEARCH CONSULTANTS

Mailing Address
PO BOX 3290

City State Zip Code
AUBURN AL 36831

Purpose of Expenditure Category/Type
SURVEY RESEARCH

Name of Federal Candidate supported or Opposed by expenditure:
CIRO D RODRIGUEZ

Calendar Year-To-Date Per Election for Office Sought **511542.48**

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
15000.00

Transaction ID: SE24-0.019411

Office Sought: House State: TX
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
JAMESTOWN ASSOCIATES

Mailing Address
5 MAPLETON RD
STE 300

City State Zip Code
PRINCETON NJ 08540

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
JULIE LASSA

Calendar Year-To-Date Per Election for Office Sought **852694.10**

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
16910.00

Transaction ID: SE24-0.019431

Office Sought: House State: WI
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	31910.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
MCCARTHY MARCUS HENNINGS, LTD.

Mailing Address
1850 M ST NW STE 235

City WASHINGTON	State DC	Zip Code 20036
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Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
GLENN CARLYLE NYE, III

Calendar Year-To-Date Per Election for Office Sought	424659.57
---	-----------

Date

M M 1 0	D D 1 5	Y Y Y Y 2 0 1 0
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Amount

18912.00

Transaction ID: SE24-0.019419

Office Sought: House State: VA
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
MCCARTHY MARCUS HENNINGS, LTD.

Mailing Address
1850 M ST NW STE 235

City WASHINGTON	State DC	Zip Code 20036
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Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
HARRY TEAGUE

Calendar Year-To-Date Per Election for Office Sought	549773.46
---	-----------

Date

M M 1 0	D D 1 5	Y Y Y Y 2 0 1 0
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Amount

19345.00

Transaction ID: SE24-0.019420

Office Sought: House State: NM
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	38257.00
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date

M M 1 2	D D 0 2	Y Y Y Y 2 0 1 0
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**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
MCCARTHY MARCUS HENNINGS, LTD.

Mailing Address
1850 M ST NW STE 235

City State Zip Code
WASHINGTON DC 20036

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
FRANK M KRATOVIL, JR

Calendar Year-To-Date Per Election for Office Sought
839714.82

Date
10 / 15 / 2010

Amount
19409.00

Transaction ID: SE24-0.019424

Office Sought: House State: MD
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
MCLAUGHLIN AND ASSOCIATES INC

Mailing Address
566 S RT 303

City State Zip Code
BLAUVELT NY 10913

Purpose of Expenditure Category/Type
SURVEY RESEARCH

Name of Federal Candidate supported or Opposed by expenditure:
BOBBY NEAL BRIGHT, SR

Calendar Year-To-Date Per Election for Office Sought
1059422.59

Date
10 / 15 / 2010

Amount
11500.00

Transaction ID: SE24-0.019370

Office Sought: House State: AL
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	30909.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date 12 / 02 / 2010

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
MCLAUGHLIN AND ASSOCIATES INC

Mailing Address
566 S RT 303

City State Zip Code
BLAUVELT NY 10913

Purpose of Expenditure Category/Type
SURVEY RESEARCH

Name of Federal Candidate supported or Opposed by expenditure:
THOMAS STUART PRICE PERRIELLO

Calendar Year-To-Date Per Election for Office Sought
1006200.34

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
11500.00

Transaction ID: SE24-0.019449

Office Sought: House State: VA
 Senate District: 05
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
MH MEDIA LLC

Mailing Address
7801 NORFOLK AVENUE
SUITE T3

City State Zip Code
BETHESDA MD 20814

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
MICHAEL A. ARCURI

Calendar Year-To-Date Per Election for Office Sought
438320.54

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
21782.92

Transaction ID: SE24-0.019425

Office Sought: House State: NY
 Senate District: 24
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	33282.92
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NMB RESEARCH LLC

Mailing Address
214 N FAYETTE ST

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

Purpose of Expenditure SURVEY RESEARCH	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
SCOTT MURPHY

Calendar Year-To-Date Per Election for Office Sought	777925.03
---	-----------

Date

M M 1 0	/ D D 1 5	/ Y Y Y Y 2 0 1 0
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Amount

11500.00

Transaction ID: SE24-0.019427

Office Sought: House State: NY
 Senate District: 20
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
NMB RESEARCH LLC

Mailing Address
214 N FAYETTE ST

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

Purpose of Expenditure SURVEY RESEARCH	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
WILLIAM RICHARD KEATING

Calendar Year-To-Date Per Election for Office Sought	733820.18
---	-----------

Date

M M 1 0	/ D D 1 5	/ Y Y Y Y 2 0 1 0
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Amount

15000.00

Transaction ID: SE24-0.019429

Office Sought: House State: MA
 Senate District: 10
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	26500.00
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date

M M 1 2	/ D D 0 2	/ Y Y Y Y 2 0 1 0
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SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NMB RESEARCH LLC

Mailing Address
214 N FAYETTE ST

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
SURVEY RESEARCH

Name of Federal Candidate supported or Opposed by expenditure:
JULIE LASSA

Calendar Year-To-Date Per Election for Office Sought **852694.10**

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
1452.98

Transaction ID: SE24-0.019430

Office Sought: House State: WI
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
OLD SCHOOL PRODUCTIONS

Mailing Address
1209 KINSDALE DR

City State Zip Code
RALEIGH NC 27615

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
LINCOLN EDWARD DAVIS

Calendar Year-To-Date Per Election for Office Sought **532940.67**

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
4000.00

Transaction ID: SE24-0.019375

Office Sought: House State: TN
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	5452.98
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
OLD SCHOOL PRODUCTIONS

Mailing Address
1209 KINSDALE DR

City State Zip Code
RALEIGH NC 27615

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
LINCOLN EDWARD DAVIS

Calendar Year-To-Date Per Election for Office Sought
532940.67

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
17600.00

Transaction ID: SE24-0.019376

Office Sought: House State: TN
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
OLD SCHOOL PRODUCTIONS

Mailing Address
1209 KINSDALE DR

City State Zip Code
RALEIGH NC 27615

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
LINCOLN EDWARD DAVIS

Calendar Year-To-Date Per Election for Office Sought
532940.67

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
3183.14

Transaction ID: SE24-0.019377

Office Sought: House State: TN
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	20783.14
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
ONMESSAGE INC

Mailing Address
2130 PRIEST BRIDGE DR # 11

City State Zip Code
CROFTON MD 21114

Purpose of Expenditure Category/Type
SURVEY RESEARCH

Name of Federal Candidate supported or Opposed by expenditure:
LINCOLN EDWARD DAVIS

Calendar Year-To-Date Per Election for Office Sought
532940.67

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
15000.00

Transaction ID: SE24-0.019374

Office Sought: House State: TN
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
ONMESSAGE INC

Mailing Address
2130 PRIEST BRIDGE DR # 11

City State Zip Code
CROFTON MD 21114

Purpose of Expenditure Category/Type
SURVEY RESEARCH

Name of Federal Candidate supported or Opposed by expenditure:
BETSY MARKEY

Calendar Year-To-Date Per Election for Office Sought
840396.20

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
19000.00

Transaction ID: SE24-0.019380

Office Sought: House State: CO
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	34000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date
M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
ONMESSAGE INC

Mailing Address
2130 PRIEST BRIDGE DR # 11

City State Zip Code
CROFTON MD 21114

Purpose of Expenditure Category/Type
SURVEY RESEARCH

Name of Federal Candidate supported or Opposed by expenditure:
ALAN MARK GRAYSON

Calendar Year-To-Date Per Election for Office Sought
593229.86

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
20500.00

Transaction ID: SE24-0.019385

Office Sought: House State: FL
 Senate District: 08
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
ONMESSAGE INC

Mailing Address
2130 PRIEST BRIDGE DR # 11

City State Zip Code
CROFTON MD 21114

Purpose of Expenditure Category/Type
SURVEY RESEARCH

Name of Federal Candidate supported or Opposed by expenditure:
JOHN MCKEE SPRATT, JR

Calendar Year-To-Date Per Election for Office Sought
1007843.19

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
19300.00

Transaction ID: SE24-0.019401

Office Sought: House State: SC
 Senate District: 05
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	39800.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date
M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
ONMESSAGE INC

Mailing Address
2130 PRIEST BRIDGE DR # 11

City CROFTON	State MD	Zip Code 21114
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Purpose of Expenditure SURVEY RESEARCH	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
MICHAEL A. OLIVERIO, II

Calendar Year-To-Date Per Election for Office Sought	722606.06
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
11500.00

Transaction ID: SE24-0.019417

Office Sought: House State: WV
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
ONMESSAGE INC

Mailing Address
2130 PRIEST BRIDGE DR # 11

City CROFTON	State MD	Zip Code 21114
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Purpose of Expenditure SURVEY RESEARCH	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
HARRY TEAGUE

Calendar Year-To-Date Per Election for Office Sought	549773.46
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
11500.00

Transaction ID: SE24-0.019421

Office Sought: House State: NM
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	23000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
ONMESSAGE INC

Mailing Address
2130 PRIEST BRIDGE DR # 11

City State Zip Code
CROFTON MD 21114

Purpose of Expenditure Category/Type
SURVEY RESEARCH

Name of Federal Candidate supported or Opposed by expenditure:
STEVEN L KAGEN

Calendar Year-To-Date Per Election for Office Sought
410601.65

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
11500.00

Transaction ID: SE24-0.019422

Office Sought: House State: WI
 Senate District: 08
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
ONMESSAGE INC

Mailing Address
2130 PRIEST BRIDGE DR # 11

City State Zip Code
CROFTON MD 21114

Purpose of Expenditure Category/Type
SURVEY RESEARCH

Name of Federal Candidate supported or Opposed by expenditure:
WILLIAM RICHARD KEATING

Calendar Year-To-Date Per Election for Office Sought
733820.18

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
19065.00

Transaction ID: SE24-0.019428

Office Sought: House State: MA
 Senate District: 10
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	30565.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date
M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
ONMESSAGE INC

Mailing Address
2130 PRIEST BRIDGE DR # 11

City State Zip Code
CROFTON MD 21114

Purpose of Expenditure Category/Type
SURVEY RESEARCH

Name of Federal Candidate supported or Opposed by expenditure:
SANFORD D BISHOP, JR

Calendar Year-To-Date Per Election for Office Sought 371153.39

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
4000.00

Transaction ID: SE24-0.019437

Office Sought: House State: GA
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
ONMESSAGE INC

Mailing Address
2130 PRIEST BRIDGE DR # 11

City State Zip Code
CROFTON MD 21114

Purpose of Expenditure Category/Type
SURVEY RESEARCH

Name of Federal Candidate supported or Opposed by expenditure:
A. B. CHANDLER, III

Calendar Year-To-Date Per Election for Office Sought 588764.28

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
19280.00

Transaction ID: SE24-0.019440

Office Sought: House State: KY
 Senate District: 06
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	23280.00
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
ONMESSAGE INC

Mailing Address
2130 PRIEST BRIDGE DR # 11

City CROFTON	State MD	Zip Code 21114
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Purpose of Expenditure SURVEY RESEARCH	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
BARON PAUL HILL

Calendar Year-To-Date Per Election for Office Sought	851111.58
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Date

M M 1 0	/ D D 1 5	/ Y Y Y Y 2 0 1 0
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Amount

11500.00

Transaction ID: SE24-0.019441

Office Sought: House State: IN
 Senate District: 09
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
ONMESSAGE INC

Mailing Address
2130 PRIEST BRIDGE DR # 11

City CROFTON	State MD	Zip Code 21114
-----------------	-------------	-------------------

Purpose of Expenditure SURVEY RESEARCH	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
GENE TAYLOR

Calendar Year-To-Date Per Election for Office Sought	341817.09
---	-----------

Date

M M 1 0	/ D D 1 5	/ Y Y Y Y 2 0 1 0
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Amount

4000.00

Transaction ID: SE24-0.019445

Office Sought: House State: MS
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	15500.00
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date

M M 1 2	/ D D 0 2	/ Y Y Y Y 2 0 1 0
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**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
ONMESSAGE INC

Mailing Address
2130 PRIEST BRIDGE DR # 11

City CROFTON	State MD	Zip Code 21114
-----------------	-------------	-------------------

Purpose of Expenditure SURVEY RESEARCH	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
GENE TAYLOR

Calendar Year-To-Date Per Election for Office Sought	341817.09
---	-----------

Date

M M 1 0	/ D D 1 5	/ Y Y Y Y 2 0 1 0
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Amount

18300.00

Transaction ID: SE24-0.019446

Office Sought: House State: MS
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
ONMESSAGE INC

Mailing Address
2130 PRIEST BRIDGE DR # 11

City CROFTON	State MD	Zip Code 21114
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Purpose of Expenditure SURVEY RESEARCH	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
THOMAS STUART PRICE PERRIELLO

Calendar Year-To-Date Per Election for Office Sought	1006200.34
---	------------

Date

M M 1 0	/ D D 1 5	/ Y Y Y Y 2 0 1 0
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Amount

19017.00

Transaction ID: SE24-0.019450

Office Sought: House State: VA
 Senate District: 05
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	37317.00
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date

M M 1 2	/ D D 0 2	/ Y Y Y Y 2 0 1 0
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**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
SCOTT HOWELL AND COMPANY LP

Mailing Address
3900 WILLOW ST
STE 200

City	State	Zip Code
DALLAS	TX	75226

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
BOBBY NEAL BRIGHT, SR

Calendar Year-To-Date Per Election for Office Sought	1059422.59
---	------------

Date

M M 1 0	/ D D 1 5	/ Y Y Y Y 2 0 1 0
------------	--------------	----------------------

Amount

19900.00

Transaction ID: SE24-0.019371

Office Sought: House State: AL
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
SCOTT HOWELL AND COMPANY LP

Mailing Address
3900 WILLOW ST
STE 200

City	State	Zip Code
DALLAS	TX	75226

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
JIM MARSHALL

Calendar Year-To-Date Per Election for Office Sought	392921.61
---	-----------

Date

M M 1 0	/ D D 1 5	/ Y Y Y Y 2 0 1 0
------------	--------------	----------------------

Amount

16897.50

Transaction ID: SE24-0.019382

Office Sought: House State: GA
 Senate District: 08
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	36797.50
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date

M M 1 2	/ D D 0 2	/ Y Y Y Y 2 0 1 0
------------	--------------	----------------------

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
SCOTT HOWELL AND COMPANY LP

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Mailing Address
3900 WILLOW ST
STE 200

Amount
15875.00

City State Zip Code
DALLAS TX 75226

Transaction ID: SE24-0.019432

Purpose of Expenditure
MEDIA

Office Sought: House State: FL
 Senate District: 24
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
SUZANNE KOSMAS

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 588989.37

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
SCOTT HOWELL AND COMPANY LP

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Mailing Address
3900 WILLOW ST
STE 200

Amount
15775.00

City State Zip Code
DALLAS TX 75226

Transaction ID: SE24-0.019433

Purpose of Expenditure
MEDIA

Office Sought: House State: IN
 Senate District: 02
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
JOSEPH S DONNELLY

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 562969.31

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	31650.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
SCOTT HOWELL AND COMPANY LP

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Mailing Address
3900 WILLOW ST
STE 200

Amount
18155.00

City State Zip Code
DALLAS TX 75226

Transaction ID: SE24-0.019442

Purpose of Expenditure Category/Type
MEDIA

Office Sought: House State: IN
 Senate District: 09
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
BARON PAUL HILL

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
851111.58

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
SCOTT HOWELL AND COMPANY LP

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Mailing Address
3900 WILLOW ST
STE 200

Amount
15075.00

City State Zip Code
DALLAS TX 75226

Transaction ID: SE24-0.019443

Purpose of Expenditure Category/Type
MEDIA

Office Sought: House State: PA
 Senate District: 10
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
CHRISTOPHER P CARNEY

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
749907.30

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	33230.00
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
SCOTT HOWELL AND COMPANY LP

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Mailing Address
3900 WILLOW ST
STE 200

Amount
15185.00

City State Zip Code
DALLAS TX 75226

Transaction ID: SE24-0.019448

Purpose of Expenditure Category/Type
MEDIA

Office Sought: House State: NH
 Senate District: 01
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
CAROL SHEA-PORTER

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1025398.03

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
ONMESSAGE INC

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Mailing Address
2130 PRIEST BRIDGE DR # 11

Amount
17000.00

City State Zip Code
CROFTON MD 21114

Transaction ID: SE24-0.019438

Purpose of Expenditure Category/Type
SURVEY RESEARCH

Office Sought: House State: GA
 Senate District: 02
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
SANFORD D BISHOP, JR

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
371153.39

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	32185.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
RISING TIDE MEDIA GROUP LLC

Mailing Address
226 S FAYETTE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
MARTIN HEINRICH

Calendar Year-To-Date Per Election for Office Sought
549013.27

Date
10 / 15 / 2010

Amount
18080.00

Transaction ID: SE24-0.019390

Office Sought: House State: NM
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
SANDLER-INNOCENZI INC

Mailing Address
705 PRINCE ST

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
MARK CRITZ

Calendar Year-To-Date Per Election for Office Sought
545396.48

Date
10 / 15 / 2010

Amount
4000.00

Transaction ID: SE24-0.019394

Office Sought: House State: PA
 Senate District: 12
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	22080.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date 12 / 02 / 2010

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
SANDLER-INNOCENZI INC

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Mailing Address
705 PRINCE ST

Amount
18450.00

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019399

Purpose of Expenditure
MEDIA

Category/
Type

Office Sought: House State: PA
 Senate District: 12
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
MARK CRITZ

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 545396.48

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
SRCP MEDIA

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Mailing Address
201 N UNION ST.
SUITE 200

Amount
18944.00

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019378

Purpose of Expenditure
MEDIA

Category/
Type

Office Sought: House State: AZ
 Senate District: 05
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
HARRY E. MITCHELL

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 1145282.64

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	37394.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
SRCP MEDIA

Mailing Address
201 N UNION ST.
SUITE 200

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
ALLEN F. BOYD, JR.

Calendar Year-To-Date Per Election for Office Sought **698576.56**

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
18636.00

Transaction ID: SE24-0.019386

Office Sought: House State: FL
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
SRCP MEDIA

Mailing Address
201 N UNION ST.
SUITE 200

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
KATHLEEN ANN DAHLKEMPER

Calendar Year-To-Date Per Election for Office Sought **446804.92**

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
18672.00

Transaction ID: SE24-0.019392

Office Sought: House State: PA
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	37308.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
SRCP MEDIA

Mailing Address
201 N UNION ST.
SUITE 200

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
DENNIS HECK

Calendar Year-To-Date Per Election for Office Sought	1245269.79
---	------------

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
17667.00

Transaction ID: SE24-0.019415

Office Sought: House State: WA
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
SRCP MEDIA

Mailing Address
201 N UNION ST.
SUITE 200

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
STEVEN L KAGEN

Calendar Year-To-Date Per Election for Office Sought	410601.65
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
18617.00

Transaction ID: SE24-0.019423

Office Sought: House State: WI
 Senate District: 08
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	36284.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
SRCP MEDIA

Mailing Address
201 N UNION ST.
SUITE 200

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
STEPHANIE M HERSETH SANDLIN

Calendar Year-To-Date Per Election for Office Sought 726769.70

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
19447.00

Transaction ID: SE24-0.019436

Office Sought: House State: SD
 Senate District: 00
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
SRCP MEDIA

Mailing Address
201 N UNION ST.
SUITE 200

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
KURT SCHRADER

Calendar Year-To-Date Per Election for Office Sought 746728.79

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
14946.00

Transaction ID: SE24-0.019451

Office Sought: House State: OR
 Senate District: 05
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	34393.00
(b) SUBTOTAL of Unitemized Independent Expenditures	<input style="width:100%;" type="text"/>
(c) TOTAL Independent Expenditures	<input style="width:100%;" type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
SRCP MEDIA

Mailing Address
201 N UNION ST.
SUITE 200

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
KURT SCHRADER

Calendar Year-To-Date Per Election for Office Sought **746728.79**

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
13449.00

Transaction ID: SE24-0.019452

Office Sought: House State: OR
 Senate District: 05
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
THE TARRANCE GROUP

Mailing Address
201 N UNION ST
STE 410

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
SURVEY RESEARCH

Name of Federal Candidate supported or Opposed by expenditure:
JOHN A BOCCIERI

Calendar Year-To-Date Per Election for Office Sought **1262311.08**

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
11500.00

Transaction ID: SE24-0.019372

Office Sought: House State: OH
 Senate District: 16
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	24949.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
THE TARRANCE GROUP

Mailing Address
201 N UNION ST
STE 410

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
SURVEY RESEARCH

Name of Federal Candidate supported or Opposed by expenditure:
HARRY E. MITCHELL

Calendar Year-To-Date Per Election for Office Sought 1145282.64

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
11500.00

Transaction ID: SE24-0.019379

Office Sought: House State: AZ
 Senate District: 05
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
SCOTT HOWELL AND COMPANY LP

Mailing Address
3900 WILLOW ST
STE 200

City State Zip Code
DALLAS TX 75226

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
ZACHARY T SPACE

Calendar Year-To-Date Per Election for Office Sought 1124970.20

Date
M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 1 0

Amount
17105.00

Transaction ID: SE24-0.019457

Office Sought: House State: OH
 Senate District: 18
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	28605.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
SCOTT HOWELL AND COMPANY LP

Date
M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 1 0

Mailing Address
3900 WILLOW ST
STE 200

Amount
18670.00

City State Zip Code
DALLAS TX 75226

Transaction ID: SE24-0.019458

Purpose of Expenditure Category/Type
MEDIA

Office Sought: House State: OH
 Senate District: 18
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
ZACHARY T SPACE

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1124970.20

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
ONMESSAGE INC

Date
M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 1 0

Mailing Address
2130 PRIEST BRIDGE DR # 11

Amount
4767.00

City State Zip Code
CROFTON MD 21114

Transaction ID: SE24-0.019455

Purpose of Expenditure Category/Type
MEDIA

Office Sought: House State: OH
 Senate District: 06
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
CHARLES A WILSON

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
337615.55

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	23437.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
ONMESSAGE INC

Mailing Address
2130 PRIEST BRIDGE DR # 11

City CROFTON	State MD	Zip Code 21114
-----------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
EARL R. POMEROY

Calendar Year-To-Date Per Election for Office Sought	992623.58
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 1 0

Amount
19100.00

Transaction ID: SE24-0.019460

Office Sought: House State: ND
 Senate District: 00
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
DMM MEDIA LLC

Mailing Address
3299 K ST NW
SUITE 200

City WASHINGTON	State DC	Zip Code 20007
--------------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
COLLEEN WAKAKO HANABUSA

Calendar Year-To-Date Per Election for Office Sought	342030.85
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 1 0

Amount
4000.00

Transaction ID: SE24-0.019461

Office Sought: House State: HI
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	23100.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
DMM MEDIA LLC

Mailing Address
3299 K ST NW
SUITE 200

City WASHINGTON	State DC	Zip Code 20007
--------------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
COLLEEN WAKAKO HANABUSA

Calendar Year-To-Date Per Election for Office Sought	342030.85
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 1 0

Amount
20312.00

Transaction ID: SE24-0.019462

Office Sought: House State: HI
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
BASELICE AND ASSOCIATES INC

Mailing Address
4131 SPICEWOOD SPRINGS RD
STE O-2

City AUSTIN	State TX	Zip Code 78759
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Purpose of Expenditure SURVEY RESEARCH	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
EARL R. POMEROY

Calendar Year-To-Date Per Election for Office Sought	992623.58
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 1 0

Amount
11500.00

Transaction ID: SE24-0.019459

Office Sought: House State: ND
 Senate District: 00
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	31812.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
AYRES MCHENRY AND ASSOCIATES

Date
M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 1 0

Mailing Address
112 N ALFRED ST

Amount
15000.00

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019456

Purpose of Expenditure Category/Type
SURVEY RESEARCH

Office Sought: House State: OH
 Senate District: 06
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
CHARLES A WILSON

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
337615.55

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Date
M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 1 0

Mailing Address
815 SLATERS LANE

Amount
97166.73

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019463

Purpose of Expenditure Category/Type
MEDIA

Office Sought: House State: HI
 Senate District: 01
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
COLLEEN WAKAKO HANABUSA

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
342030.85

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	112166.73
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date
M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
AYRES MCHENRY AND ASSOCIATES

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
112 N ALFRED ST

Amount
11500.00

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019475

Purpose of Expenditure Category/Type
SURVEY RESEARCH

Office Sought: House State: VA
 Senate District: 09
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
FREDERICK C BOUCHER

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
814117.53

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
ANTHEM MEDIA INC

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
5524 BEE CAVES RD
STE B5

Amount
3137.00

City State Zip Code
AUSTIN TX 78746

Transaction ID: SE24-0.019476

Purpose of Expenditure Category/Type
MEDIA

Office Sought: House State: VA
 Senate District: 09
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
FREDERICK C BOUCHER

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
814117.53

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	14637.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date
M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
ANTHEM MEDIA INC

Mailing Address
5524 BEE CAVES RD
STE B5

City State Zip Code
AUSTIN TX 78746

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
FREDERICK C BOUCHER

Calendar Year-To-Date Per Election for Office Sought **814117.53**

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
17759.00

Transaction ID: SE24-0.019477

Office Sought: House State: VA
 Senate District: 09
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
ANTHEM MEDIA INC

Mailing Address
5524 BEE CAVES RD
STE B5

City State Zip Code
AUSTIN TX 78746

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
CIRO D RODRIGUEZ

Calendar Year-To-Date Per Election for Office Sought **511542.48**

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
2420.00

Transaction ID: SE24-0.019478

Office Sought: House State: TX
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	20179.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
HILL RESEARCH CONSULTANTS

Mailing Address
PO BOX 3290

City State Zip Code
AUBURN AL 36831

Purpose of Expenditure Category/
SURVEY RESEARCH Type

Name of Federal Candidate supported or Opposed by expenditure:
GARY J MCDOWELL

Calendar Year-To-Date Per Election for Office Sought
1084651.42

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
11500.00

Transaction ID: SE24-0.019481

Office Sought: House State: MI
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
MH MEDIA LLC

Mailing Address
7801 NORFOLK AVENUE
SUITE T3

City State Zip Code
BETHESDA MD 20814

Purpose of Expenditure Category/
MEDIA Type

Name of Federal Candidate supported or Opposed by expenditure:
GARY J MCDOWELL

Calendar Year-To-Date Per Election for Office Sought
1084651.42

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
21360.18

Transaction ID: SE24-0.019480

Office Sought: House State: MI
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	32860.18
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
JAMESTOWN ASSOCIATES

Mailing Address
5 MAPLETON RD
STE 300

City State Zip Code
PRINCETON NJ 08540

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
JULIE LASSA

Calendar Year-To-Date Per Election for Office Sought **852694.10**

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
3700.00

Transaction ID: SE24-0.019479

Office Sought: House State: WI
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
JAMESTOWN ASSOCIATES

Mailing Address
5 MAPLETON RD
STE 300

City State Zip Code
PRINCETON NJ 08540

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
JOHN TONY SALAZAR

Calendar Year-To-Date Per Election for Office Sought **763073.31**

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
3760.00

Transaction ID: SE24-0.019483

Office Sought: House State: CO
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	7460.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
JOHN TONY SALAZAR

Calendar Year-To-Date Per Election for Office Sought	763073.31
---	-----------

Date

M M	/	D D	/	Y Y Y Y
1 0		1 9		2 0 1 0

Amount

5237.60

Transaction ID: SE24-0.019482

Office Sought: House State: CO
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
OLD SCHOOL PRODUCTIONS

Mailing Address
1209 KINSDALE DR

City RALEIGH	State NC	Zip Code 27615
-----------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
LINCOLN EDWARD DAVIS

Calendar Year-To-Date Per Election for Office Sought	532940.67
---	-----------

Date

M M	/	D D	/	Y Y Y Y
1 0		2 0		2 0 1 0

Amount

178.29

Transaction ID: SE24-0.019514

Office Sought: House State: TN
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	5415.89
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date

M M	/	D D	/	Y Y Y Y
1 2		0 2		2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
OLD SCHOOL PRODUCTIONS

Mailing Address
1209 KINSDALE DR

City RALEIGH	State NC	Zip Code 27615
-----------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
LINCOLN EDWARD DAVIS

Calendar Year-To-Date Per Election for Office Sought	532940.67
---	-----------

Date

M	M
1	0

 /

D	D
2	0

 /

Y	Y	Y	Y
2	0	1	0

Amount

17510.00

Transaction ID: SE24-0.019515

Office Sought: House State: TN
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
SRCP MEDIA

Mailing Address
201 N UNION ST.
SUITE 200

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
HARRY E. MITCHELL

Calendar Year-To-Date Per Election for Office Sought	1145282.64
---	------------

Date

M	M
1	0

 /

D	D
2	0

 /

Y	Y	Y	Y
2	0	1	0

Amount

16545.00

Transaction ID: SE24-0.019513

Office Sought: House State: AZ
 Senate District: 05
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	34055.00
(b) SUBTOTAL of Unitemized Independent Expenditures	[Empty Box]
(c) TOTAL Independent Expenditures	[Empty Box]

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date

M	M
1	2

 /

D	D
0	2

 /

Y	Y	Y	Y
2	0	1	0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
RISING TIDE MEDIA GROUP LLC

Mailing Address
226 S FAYETTE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
MARTIN HEINRICH

Calendar Year-To-Date Per Election for Office Sought
549013.27

Date
10 / 20 / 2010

Amount
17212.00
Transaction ID: SE24-0.019509

Office Sought: House State: NM
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify): _____
2010

Full Name (Last, First, Middle, Initial) of Payee
JAMESTOWN ASSOCIATES

Mailing Address
5 MAPLETON RD
STE 300

City State Zip Code
PRINCETON NJ 08540

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
JOHN TONY SALAZAR

Calendar Year-To-Date Per Election for Office Sought
763073.31

Date
10 / 20 / 2010

Amount
18450.00
Transaction ID: SE24-0.019510

Office Sought: House State: CO
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify): _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	35662.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date 12 / 02 / 2010

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
CRAFT MEDIA DIGITAL

Mailing Address
706 7TH ST SE

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
PHILIP G HARE

Calendar Year-To-Date Per Election for Office Sought	896108.86
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Amount
17410.00

Transaction ID: SE24-0.019511

Office Sought: House State: IL
 Senate District: 17
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
CRAFT MEDIA DIGITAL

Mailing Address
706 7TH ST SE

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
PHILIP G HARE

Calendar Year-To-Date Per Election for Office Sought	896108.86
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Amount
11500.00

Transaction ID: SE24-0.019512

Office Sought: House State: IL
 Senate District: 17
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	28910.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
AMERICAN VIEWPOINT INC

Mailing Address
300 N LEE ST
STE 400

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
SURVEY RESEARCH

Name of Federal Candidate supported or Opposed by expenditure:
PAUL E. KANJORSKI

Calendar Year-To-Date Per Election for Office Sought
901831.32

Date
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Amount
11500.00

Transaction ID: SE24-0.019559

Office Sought: House State: PA
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
JAMESTOWN ASSOCIATES

Mailing Address
5 MAPLETON RD
STE 300

City State Zip Code
PRINCETON NJ 08540

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
PAUL E. KANJORSKI

Calendar Year-To-Date Per Election for Office Sought
901831.32

Date
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Amount
18150.00

Transaction ID: SE24-0.019558

Office Sought: House State: PA
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	29650.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date
M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
ONMESSAGE INC

Mailing Address
2130 PRIEST BRIDGE DR # 11

City State Zip Code
CROFTON MD 21114

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
CHARLES A WILSON

Calendar Year-To-Date Per Election for Office Sought **337615.55**

Date
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Amount
15800.00

Transaction ID: SE24-0.019560

Office Sought: House State: OH
 Senate District: 06
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
COLLEEN WAKAKO HANABUSA

Calendar Year-To-Date Per Election for Office Sought **342030.85**

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
97192.31

Transaction ID: SE24-0.019657

Office Sought: House State: HI
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	112992.31
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
PAUL ANTHONY GOSAR

Calendar Year-To-Date Per Election for Office Sought **1310874.40**

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
226455.20

Transaction ID: SE24-0.019710

Office Sought: House State: AZ
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
ANN KIRKPATRICK

Calendar Year-To-Date Per Election for Office Sought **1310874.40**

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
226455.19

Transaction ID: SE24-0.019709

Office Sought: House State: AZ
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	452910.39
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
MARTHA ROBY

Calendar Year-To-Date Per Election for Office Sought	1059422.59
---	------------

Date

M M 1 0	D D 2 2	Y Y Y Y 2 0 1 0
------------	------------	--------------------

Amount

20000.00

Transaction ID: SE24-0.019708

Office Sought: House State: AL
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
BOBBY NEAL BRIGHT, SR

Calendar Year-To-Date Per Election for Office Sought	1059422.59
---	------------

Date

M M 1 0	D D 2 2	Y Y Y Y 2 0 1 0
------------	------------	--------------------

Amount

198430.14

Transaction ID: SE24-0.019707

Office Sought: House State: AL
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	218430.14
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date

M M 1 2	D D 0 2	Y Y Y Y 2 0 1 0
------------	------------	--------------------

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
WILLIAM OWENS

Calendar Year-To-Date Per Election for Office Sought **218531.98**

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
176976.98

Transaction ID: SE24-0.019706

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
JOHN A BOCCIERI

Calendar Year-To-Date Per Election for Office Sought **1262311.08**

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
332475.00

Transaction ID: SE24-0.019705

Office Sought: House State: OH
 Senate District: 16
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	509451.98
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
WILLIAM G FOSTER

Calendar Year-To-Date Per Election for Office Sought 338166.62

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
53453.03

Transaction ID: SE24-0.019704

Office Sought: House State: IL
 Senate District: 14
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
PHILIP G HARE

Calendar Year-To-Date Per Election for Office Sought 896108.86

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
408266.56

Transaction ID: SE24-0.019703

Office Sought: House State: IL
 Senate District: 17
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	461719.59
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
JOSEPH S DONNELLY

Calendar Year-To-Date Per Election for Office Sought 562969.31

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
61801.48

Transaction ID: SE24-0.019702

Office Sought: House State: IN
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
BARON PAUL HILL

Calendar Year-To-Date Per Election for Office Sought 851111.58

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
183476.97

Transaction ID: SE24-0.019701

Office Sought: House State: IN
 Senate District: 09
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	245278.45
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
WILLIAM RICHARD KEATING

Calendar Year-To-Date Per Election for Office Sought
733820.18

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
275072.60

Transaction ID: SE24-0.019700

Office Sought: House State: MA
 Senate District: 10
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
FRANK M KRATOVIL, JR

Calendar Year-To-Date Per Election for Office Sought
839714.82

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
337361.11

Transaction ID: SE24-0.019699

Office Sought: House State: MD
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	612433.71
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date
M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
GARY J MCDOWELL

Calendar Year-To-Date Per Election for Office Sought 1084651.42

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
211640.99

Transaction ID: SE24-0.019698

Office Sought: House State: MI
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
MARK HAMILTON SCHAUER

Calendar Year-To-Date Per Election for Office Sought 1468368.98

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
209532.31

Transaction ID: SE24-0.019697

Office Sought: House State: MI
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	421173.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
TIMOTHY J WALZ

Calendar Year-To-Date Per Election for Office Sought 527312.23

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
140568.94

Transaction ID: SE24-0.019696

Office Sought: House State: MN
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
IKE SKELTON

Calendar Year-To-Date Per Election for Office Sought 1234362.16

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
246798.88

Transaction ID: SE24-0.019695

Office Sought: House State: MO
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	387367.82
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Mailing Address
815 SLATERS LANE

Amount
55875.44

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019658

Purpose of Expenditure Category/Type
MEDIA

Office Sought: House State: GA
 Senate District: 08
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
JIM MARSHALL

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
392921.61

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Mailing Address
815 SLATERS LANE

Amount
55412.18

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019656

Purpose of Expenditure Category/Type
MEDIA

Office Sought: House State: IL
 Senate District: 10
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
DANIEL JOSEPH SEALS

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
371211.60

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	111287.62
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date
M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/
MEDIA Type

Name of Federal Candidate supported or Opposed by expenditure:
DEBORAH HALVORSON

Calendar Year-To-Date Per Election for Office Sought 237398.24

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
33040.80

Transaction ID: SE24-0.019655

Office Sought: House State: IL
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
RISING TIDE MEDIA GROUP LLC

Mailing Address
226 S FAYETTE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/
MEDIA Type

Name of Federal Candidate supported or Opposed by expenditure:
MARTIN HEINRICH

Calendar Year-To-Date Per Election for Office Sought 549013.27

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
18351.00

Transaction ID: SE24-0.019718

Office Sought: House State: NM
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	51391.80
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
SANDLER-INNOCENZI INC

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Mailing Address
705 PRINCE ST

Amount
14546.34

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019740

Purpose of Expenditure Category/Type
MEDIA

Office Sought: House State: PA
 Senate District: 12
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
MARK CRITZ

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
545396.48

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
SRCP MEDIA

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Mailing Address
201 N UNION ST.
SUITE 200

Amount
17454.00

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019715

Purpose of Expenditure Category/Type
MEDIA

Office Sought: House State: FL
 Senate District: 02
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
ALLEN F. BOYD, JR.

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
698576.56

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	32000.34
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date
M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
SRCP MEDIA

Mailing Address
201 N UNION ST.
SUITE 200

City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Expenditure MEDIA		Category/ Type

Name of Federal Candidate supported or Opposed by expenditure:
STEVEN L KAGEN

Calendar Year-To-Date Per Election for Office Sought	410601.65
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
17462.00

Transaction ID: SE24-0.019716

Office Sought: House State: WI
 Senate District: 08
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
ONMESSAGE INC

Mailing Address
2130 PRIEST BRIDGE DR # 11

City CROFTON	State MD	Zip Code 21114
Purpose of Expenditure MEDIA		Category/ Type

Name of Federal Candidate supported or Opposed by expenditure:
MICHAEL A. ARCURI

Calendar Year-To-Date Per Election for Office Sought	438320.54
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
12500.00

Transaction ID: SE24-0.019713

Office Sought: House State: NY
 Senate District: 24
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	29962.00
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
ONMESSAGE INC

Mailing Address
2130 PRIEST BRIDGE DR # 11

City CROFTON	State MD	Zip Code 21114
-----------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
SANFORD D BISHOP, JR

Calendar Year-To-Date Per Election for Office Sought	371153.39
---	-----------

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	2		2	0	1	0

Amount

19300.00

Transaction ID: SE24-0.019722

Office Sought: House State: GA
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
ONMESSAGE INC

Mailing Address
2130 PRIEST BRIDGE DR # 11

City CROFTON	State MD	Zip Code 21114
-----------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
THOMAS STUART PRICE PERRIELLO

Calendar Year-To-Date Per Election for Office Sought	1006200.34
---	------------

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	2		2	0	1	0

Amount

23631.50

Transaction ID: SE24-0.019726

Office Sought: House State: VA
 Senate District: 05
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	42931.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	2		2	0	1	0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
ONMESSAGE INC

Mailing Address
2130 PRIEST BRIDGE DR # 11

City CROFTON	State MD	Zip Code 21114
-----------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
MARK HAMILTON SCHAUER

Calendar Year-To-Date Per Election for Office Sought	1468368.98
---	------------

Date

M	M
1	0

 /

D	D
2	2

 /

Y	Y	Y	Y
2	0	1	0

Amount

13300.00

Transaction ID: SE24-0.019732

Office Sought: House State: MI
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
ONMESSAGE INC

Mailing Address
2130 PRIEST BRIDGE DR # 11

City CROFTON	State MD	Zip Code 21114
-----------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
FRANK M KRATOVIL, JR

Calendar Year-To-Date Per Election for Office Sought	839714.82
---	-----------

Date

M	M
1	0

 /

D	D
2	2

 /

Y	Y	Y	Y
2	0	1	0

Amount

11500.00

Transaction ID: SE24-0.019737

Office Sought: House State: MD
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	24800.00
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date

M	M
1	2

 /

D	D
0	2

 /

Y	Y	Y	Y
2	0	1	0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
ONMESSAGE INC

Mailing Address
2130 PRIEST BRIDGE DR # 11

City CROFTON	State MD	Zip Code 21114
-----------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
JOHN MCKEE SPRATT, JR

Calendar Year-To-Date Per Election for Office Sought 1007843.19

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
19200.00

Transaction ID: SE24-0.019728

Office Sought: House State: SC
 Senate District: 05
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
ONMESSAGE INC

Mailing Address
2130 PRIEST BRIDGE DR # 11

City CROFTON	State MD	Zip Code 21114
-----------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
COLLEEN WAKAKO HANABUSA

Calendar Year-To-Date Per Election for Office Sought 342030.85

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
15000.00

Transaction ID: SE24-0.019724

Office Sought: House State: HI
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	34200.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
SCOTT HOWELL AND COMPANY LP

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Mailing Address
3900 WILLOW ST
STE 200

Amount
17334.17

City State Zip Code
DALLAS TX 75226

Transaction ID: SE24-0.019721

Purpose of Expenditure
MEDIA

Category/
Type

Office Sought: House State: GA
 Senate District: 08
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
JIM MARSHALL

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 392921.61

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
SCOTT HOWELL AND COMPANY LP

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Mailing Address
3900 WILLOW ST
STE 200

Amount
19549.00

City State Zip Code
DALLAS TX 75226

Transaction ID: SE24-0.019733

Purpose of Expenditure
MEDIA

Category/
Type

Office Sought: House State: AL
 Senate District: 02
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
BOBBY NEAL BRIGHT, SR

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 1059422.59

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	36883.17
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
SCOTT HOWELL AND COMPANY LP

Mailing Address
3900 WILLOW ST
STE 200

City DALLAS	State TX	Zip Code 75226
Purpose of Expenditure MEDIA		Category/ Type

Name of Federal Candidate supported or Opposed by expenditure:
ZACHARY T SPACE

Calendar Year-To-Date Per Election for Office Sought: 1124970.20

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
17579.17

Transaction ID: SE24-0.019741

Office Sought: House State: OH
 Senate District: 18
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
SCOTT HOWELL AND COMPANY LP

Mailing Address
3900 WILLOW ST
STE 200

City DALLAS	State TX	Zip Code 75226
Purpose of Expenditure MEDIA		Category/ Type

Name of Federal Candidate supported or Opposed by expenditure:
BARON PAUL HILL

Calendar Year-To-Date Per Election for Office Sought: 851111.58

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
17160.00

Transaction ID: SE24-0.019744

Office Sought: House State: IN
 Senate District: 09
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	34739.17
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M D D Y Y Y Y
1 2 0 2 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
SCOTT HOWELL AND COMPANY LP

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Mailing Address
3900 WILLOW ST
STE 200

Amount
17510.00

City State Zip Code
DALLAS TX 75226

Transaction ID: SE24-0.019745

Purpose of Expenditure Category/Type
MEDIA

Office Sought: House State: IN
 Senate District: 02
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
JOSEPH S DONNELLY

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
562969.31

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
MCCARTHY MARCUS HENNINGS, LTD.

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Mailing Address
1850 M ST NW STE 235

Amount
19111.00

City State Zip Code
WASHINGTON DC 20036

Transaction ID: SE24-0.019720

Purpose of Expenditure Category/Type
MEDIA

Office Sought: House State: VA
 Senate District: 02
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
GLENN CARLYLE NYE, III

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
424659.57

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	36621.00
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
MCCARTHY MARCUS HENNINGS, LTD.

Mailing Address
1850 M ST NW STE 235

City WASHINGTON	State DC	Zip Code 20036
--------------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
FRANK M KRATOVIL, JR

Calendar Year-To-Date Per Election for Office Sought	839714.82
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
18877.00

Transaction ID: SE24-0.019738

Office Sought: House State: MD
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
MCCARTHY MARCUS HENNINGS, LTD.

Mailing Address
1850 M ST NW STE 235

City WASHINGTON	State DC	Zip Code 20036
--------------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
MIKE MCINTYRE

Calendar Year-To-Date Per Election for Office Sought	390403.02
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
18912.00

Transaction ID: SE24-0.019739

Office Sought: House State: NC
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	37789.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
MCCARTHY MARCUS HENNINGS, LTD.

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Mailing Address
1850 M ST NW STE 235

Amount
19021.00

City State Zip Code
WASHINGTON DC 20036

Transaction ID: SE24-0.019742

Purpose of Expenditure
MEDIA

Category/
Type

Office Sought: House State: NM
 Senate District: 02
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
HARRY TEAGUE

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 549773.46

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
MCLAUGHLIN AND ASSOCIATES INC

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Mailing Address
566 S RT 303

Amount
11500.00

City State Zip Code
BLAUVELT NY 10913

Transaction ID: SE24-0.019725

Purpose of Expenditure
SURVEY RESEARCH

Category/
Type

Office Sought: House State: VA
 Senate District: 05
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
THOMAS STUART PRICE PERRIELLO

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 1006200.34

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	30521.00
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
MCLAUGHLIN AND ASSOCIATES INC

Mailing Address
566 S RT 303

City BLAUVELT	State NY	Zip Code 10913
------------------	-------------	-------------------

Purpose of Expenditure SURVEY RESEARCH	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
BOBBY NEAL BRIGHT, SR

Calendar Year-To-Date Per Election for Office Sought	1059422.59
---	------------

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
10500.00

Transaction ID: SE24-0.019734

Office Sought: House State: AL
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
HILL RESEARCH CONSULTANTS

Mailing Address
PO BOX 3290

City AUBURN	State AL	Zip Code 36831
----------------	-------------	-------------------

Purpose of Expenditure SURVEY RESEARCH	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
MARK HAMILTON SCHAUER

Calendar Year-To-Date Per Election for Office Sought	1468368.98
---	------------

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
11500.00

Transaction ID: SE24-0.019731

Office Sought: House State: MI
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	22000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
DMM MEDIA LLC

Mailing Address
3299 K ST NW
SUITE 200

City	State	Zip Code
WASHINGTON	DC	20007

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
SCOTT MURPHY

Calendar Year-To-Date Per Election for Office Sought	777925.03
---	-----------

Date

M M	/	D D	/	Y Y Y Y
1 0		2 2		2 0 1 0

Amount

19875.00

Transaction ID: SE24-0.019717

Office Sought: House State: NY
 Senate District: 20
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
DMM MEDIA LLC

Mailing Address
3299 K ST NW
SUITE 200

City	State	Zip Code
WASHINGTON	DC	20007

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
COLLEEN WAKAKO HANABUSA

Calendar Year-To-Date Per Election for Office Sought	342030.85
---	-----------

Date

M M	/	D D	/	Y Y Y Y
1 0		2 2		2 0 1 0

Amount

19672.00

Transaction ID: SE24-0.019723

Office Sought: House State: HI
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	39547.00
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date

M M	/	D D	/	Y Y Y Y
1 2		0 2		2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
DMM MEDIA LLC

Mailing Address
3299 K ST NW
SUITE 200

City WASHINGTON	State DC	Zip Code 20007
--------------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
IKE SKELTON

Calendar Year-To-Date Per Election for Office Sought	1234362.16
---	------------

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
19449.00

Transaction ID: SE24-0.019730

Office Sought: House State: MO
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
DMM MEDIA LLC

Mailing Address
3299 K ST NW
SUITE 200

City WASHINGTON	State DC	Zip Code 20007
--------------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
TIMOTHY J WALZ

Calendar Year-To-Date Per Election for Office Sought	527312.23
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
19682.00

Transaction ID: SE24-0.019743

Office Sought: House State: MN
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	39131.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
ANTHEM MEDIA INC

Mailing Address
5524 BEE CAVES RD
STE B5

City State Zip Code
AUSTIN TX 78746

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
CHAD CAUSEY

Calendar Year-To-Date Per Election for Office Sought **842212.55**

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
20566.00

Transaction ID: SE24-0.019712

Office Sought: House State: AR
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
ANTHEM MEDIA INC

Mailing Address
5524 BEE CAVES RD
STE B5

City State Zip Code
AUSTIN TX 78746

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
CIRO D RODRIGUEZ

Calendar Year-To-Date Per Election for Office Sought **511542.48**

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
20098.00

Transaction ID: SE24-0.019719

Office Sought: House State: TX
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	40664.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
ANTHEM MEDIA INC

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Mailing Address
5524 BEE CAVES RD
STE B5

Amount
16445.00

City State Zip Code
AUSTIN TX 78746

Transaction ID: SE24-0.019735

Purpose of Expenditure
MEDIA

Category/
Type

Office Sought: House State: WV
 Senate District: 01
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
MICHAEL A. OLIVERIO, II

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 722606.06

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
ANTHEM MEDIA INC

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Mailing Address
5524 BEE CAVES RD
STE B5

Amount
2949.00

City State Zip Code
AUSTIN TX 78746

Transaction ID: SE24-0.019736

Purpose of Expenditure
MEDIA

Category/
Type

Office Sought: House State: WV
 Senate District: 01
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
MICHAEL A. OLIVERIO, II

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 722606.06

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	19394.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
AYRES MCHENRY AND ASSOCIATES

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Mailing Address
112 N ALFRED ST

Amount
11500.00

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019727

Purpose of Expenditure Category/Type
SURVEY RESEARCH

Office Sought: House State: SC
 Senate District: 05
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
JOHN MCKEE SPRATT, JR

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1007843.19

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
AYRES MCHENRY AND ASSOCIATES

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Mailing Address
112 N ALFRED ST

Amount
11000.00

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019729

Purpose of Expenditure Category/Type
SURVEY RESEARCH

Office Sought: House State: MO
 Senate District: 04
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
IKE SKELTON

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1234362.16

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	22500.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
TRAVIS W CHILDERS

Calendar Year-To-Date Per Election for Office Sought	883315.28
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
196499.99

Transaction ID: SE24-0.019694

Office Sought: House State: MS
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
GENE TAYLOR

Calendar Year-To-Date Per Election for Office Sought	341817.09
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
138007.95

Transaction ID: SE24-0.019693

Office Sought: House State: MS
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	334507.94
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
MIKE MCINTYRE

Calendar Year-To-Date Per Election for Office Sought
390403.02

Date
10 / 22 / 2010

Amount
54409.38

Transaction ID: SE24-0.019692

Office Sought: House State: NC
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
EARL R. POMEROY

Calendar Year-To-Date Per Election for Office Sought
992623.58

Date
10 / 22 / 2010

Amount
149844.38

Transaction ID: SE24-0.019691

Office Sought: House State: ND
 Senate District: 00
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	204253.76
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date 12 / 02 / 2010

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
CAROL SHEA-PORTER

Calendar Year-To-Date Per Election for Office Sought 1025398.03

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
322366.63

Transaction ID: SE24-0.019690

Office Sought: House State: NH
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
ANN MCLANE KUSTER

Calendar Year-To-Date Per Election for Office Sought 424112.61

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
130331.25

Transaction ID: SE24-0.019689

Office Sought: House State: NH
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	452697.88
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
JOHN H ADLER

Calendar Year-To-Date Per Election for Office Sought 222583.49

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
43620.50

Transaction ID: SE24-0.019688

Office Sought: House State: NJ
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
MARTIN HEINRICH

Calendar Year-To-Date Per Election for Office Sought 549013.27

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
140446.25

Transaction ID: SE24-0.019687

Office Sought: House State: NM
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	184066.75
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
HARRY TEAGUE

Calendar Year-To-Date Per Election for Office Sought	549773.46
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
155936.25

Transaction ID: SE24-0.019686

Office Sought: House State: NM
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
SCOTT MURPHY

Calendar Year-To-Date Per Election for Office Sought	777925.03
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
156965.00

Transaction ID: SE24-0.019685

Office Sought: House State: NY
 Senate District: 20
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	312901.25
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
MICHAEL A. OLIVERIO, II

Calendar Year-To-Date Per Election for Office Sought 722606.06

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
189817.50

Transaction ID: SE24-0.019684

Office Sought: House State: WV
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
CIRO D RODRIGUEZ

Calendar Year-To-Date Per Election for Office Sought 511542.48

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
223943.13

Transaction ID: SE24-0.019683

Office Sought: House State: TX
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	413760.63
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Expenditure MEDIA	Category/ Type

Name of Federal Candidate supported or Opposed by expenditure:
MICHAEL A. ARCURI

Calendar Year-To-Date Per Election for Office Sought	438320.54
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
71238.13

Transaction ID: SE24-0.019682

Office Sought: House State: NY
 Senate District: 24
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Expenditure MEDIA	Category/ Type

Name of Federal Candidate supported or Opposed by expenditure:
CHARLES A WILSON

Calendar Year-To-Date Per Election for Office Sought	337615.55
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
117585.00

Transaction ID: SE24-0.019681

Office Sought: House State: OH
 Senate District: 06
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	188823.13
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
ZACHARY T SPACE

Calendar Year-To-Date Per Election for Office Sought
1124970.20

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
297976.88

Transaction ID: SE24-0.019680

Office Sought: House State: OH
 Senate District: 18
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
KURT SCHRADER

Calendar Year-To-Date Per Election for Office Sought
746728.79

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
101535.00

Transaction ID: SE24-0.019679

Office Sought: House State: OR
 Senate District: 05
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	399511.88
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date
M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City ALEXANDRIA	State VA	Zip Code 22314
---------------------------	--------------------	--------------------------

Purpose of Expenditure MEDIA	Category/ Type
--	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
BRYAN ROY LENTZ

Calendar Year-To-Date Per Election for Office Sought	337427.07
---	------------------

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
71263.50

Transaction ID: SE24-0.019678

Office Sought: House State: PA
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City ALEXANDRIA	State VA	Zip Code 22314
---------------------------	--------------------	--------------------------

Purpose of Expenditure MEDIA	Category/ Type
--	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
PATRICK J MURPHY

Calendar Year-To-Date Per Election for Office Sought	269965.32
---	------------------

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
43258.25

Transaction ID: SE24-0.019677

Office Sought: House State: PA
 Senate District: 08
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	114521.75
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
CHRISTOPHER P CARNEY

Calendar Year-To-Date Per Election for Office Sought	749907.30
---	-----------

Date

M M 1 0	/ D D 2 2	/ Y Y Y Y 2 0 1 0
------------	--------------	----------------------

Amount

191115.63

Transaction ID: SE24-0.019676

Office Sought: House State: PA
 Senate District: 10
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
PAUL E. KANJORSKI

Calendar Year-To-Date Per Election for Office Sought	901831.32
---	-----------

Date

M M 1 0	/ D D 2 2	/ Y Y Y Y 2 0 1 0
------------	--------------	----------------------

Amount

126459.38

Transaction ID: SE24-0.019675

Office Sought: House State: PA
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	317575.01
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date

M M 1 2	/ D D 0 2	/ Y Y Y Y 2 0 1 0
------------	--------------	----------------------

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
MARK CRITZ

Calendar Year-To-Date Per Election for Office Sought 545396.48

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
243340.00

Transaction ID: SE24-0.019674

Office Sought: House State: PA
 Senate District: 12
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
JOHN MCKEE SPRATT, JR

Calendar Year-To-Date Per Election for Office Sought 1007843.19

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
271445.88

Transaction ID: SE24-0.019673

Office Sought: House State: SC
 Senate District: 05
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	514785.88
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
STEPHANIE M HERSETH SANDLIN

Calendar Year-To-Date Per Election for Office Sought 726769.70

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
151020.63

Transaction ID: SE24-0.019672

Office Sought: House State: SD
 Senate District: 00
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
LINCOLN EDWARD DAVIS

Calendar Year-To-Date Per Election for Office Sought 532940.67

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
184995.00

Transaction ID: SE24-0.019671

Office Sought: House State: TN
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	336015.63
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
GLENN CARLYLE NYE, III

Calendar Year-To-Date Per Election for Office Sought 424659.57

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
114028.75

Transaction ID: SE24-0.019670

Office Sought: House State: VA
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
THOMAS STUART PRICE PERRIELLO

Calendar Year-To-Date Per Election for Office Sought 1006200.34

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
151668.75

Transaction ID: SE24-0.019669

Office Sought: House State: VA
 Senate District: 05
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	265697.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
FREDERICK C BOUCHER

Calendar Year-To-Date Per Election for Office Sought 814117.53

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
168781.88

Transaction ID: SE24-0.019668

Office Sought: House State: VA
 Senate District: 09
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
DENNIS HECK

Calendar Year-To-Date Per Election for Office Sought 1245269.79

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
273074.25

Transaction ID: SE24-0.019667

Office Sought: House State: VA
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	441856.13
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Mailing Address
815 SLATERS LANE

Amount
136361.25

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019666

Purpose of Expenditure Category/Type
MEDIA

Office Sought: House State: WI
 Senate District: 07
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
JULIE LASSA

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
852694.10

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Mailing Address
815 SLATERS LANE

Amount
79311.77

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019665

Purpose of Expenditure Category/Type
MEDIA

Office Sought: House State: WI
 Senate District: 08
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
STEVEN L KAGEN

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
410601.65

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	215673.02
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
CHAD CAUSEY

Calendar Year-To-Date Per Election for Office Sought **842212.55**

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
233493.55

Transaction ID: SE24-0.019664

Office Sought: House State: AR
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
HARRY E. MITCHELL

Calendar Year-To-Date Per Election for Office Sought **1145282.64**

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
303078.68

Transaction ID: SE24-0.019663

Office Sought: House State: AZ
 Senate District: 05
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	536572.23
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
JERRY MCNERNEY

Calendar Year-To-Date Per Election for Office Sought
357841.92

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
49323.81

Transaction ID: SE24-0.019662

Office Sought: House State: CA
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
JOHN TONY SALAZAR

Calendar Year-To-Date Per Election for Office Sought
763073.31

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
313605.19

Transaction ID: SE24-0.019661

Office Sought: House State: CO
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	362929.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date
M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
ALLEN F. BOYD, JR.

Calendar Year-To-Date Per Election for Office Sought
698576.56

Date
10 / 22 / 2010

Amount
138146.45

Transaction ID: SE24-0.019660

Office Sought: House State: FL
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
SANFORD D BISHOP, JR

Calendar Year-To-Date Per Election for Office Sought
371153.39

Date
10 / 22 / 2010

Amount
139121.58

Transaction ID: SE24-0.019659

Office Sought: House State: GA
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	277268.03
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date 12 / 02 / 2010

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
ANTHEM MEDIA INC

Mailing Address
5524 BEE CAVES RD
STE B5

City State Zip Code
AUSTIN TX 78746

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
FREDERICK C BOUCHER

Calendar Year-To-Date Per Election for Office Sought 814117.53

Date
M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 1 0

Amount
18344.00

Transaction ID: SE24-0.019749

Office Sought: House State: VA
 Senate District: 09
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
ONMESSAGE INC

Mailing Address
2130 PRIEST BRIDGE DR # 11

City State Zip Code
CROFTON MD 21114

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
EARL R. POMEROY

Calendar Year-To-Date Per Election for Office Sought 992623.58

Date
M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 1 0

Amount
19282.50

Transaction ID: SE24-0.019750

Office Sought: House State: ND
 Senate District: 00
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	37626.50
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
OLD SCHOOL PRODUCTIONS

Mailing Address
1209 KINSDALE DR

City	State	Zip Code
RALEIGH	NC	27615

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
LINCOLN EDWARD DAVIS

Calendar Year-To-Date Per Election for Office Sought	532940.67
---	-----------

Date

M M	/	D D	/	Y Y Y Y
1 0		2 3		2 0 1 0

Amount

18140.00

Transaction ID: SE24-0.019748

Office Sought: House State: TN
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
OLD SCHOOL PRODUCTIONS

Mailing Address
1209 KINSDALE DR

City	State	Zip Code
RALEIGH	NC	27615

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
LINCOLN EDWARD DAVIS

Calendar Year-To-Date Per Election for Office Sought	532940.67
---	-----------

Date

M M	/	D D	/	Y Y Y Y
1 0		2 6		2 0 1 0

Amount

3652.75

Transaction ID: SE24-0.019779

Office Sought: House State: TN
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	21792.75
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date

M M	/	D D	/	Y Y Y Y
1 2		0 2		2 0 1 0

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
CHELLIE M PINGREE

Calendar Year-To-Date Per Election for Office Sought 15595.90

Date
10 / 26 / 2010

Amount
8907.50

Transaction ID: SE24-0.019778

Office Sought: House State: ME
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
SCOTT HOWELL AND COMPANY LP

Mailing Address
3900 WILLOW ST
STE 200

City State Zip Code
DALLAS TX 75226

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
BOBBY NEAL BRIGHT, SR

Calendar Year-To-Date Per Election for Office Sought 1059422.59

Date
10 / 26 / 2010

Amount
17927.50

Transaction ID: SE24-0.019755

Office Sought: House State: AL
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	26835.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date 12 / 02 / 2010

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
SCOTT HOWELL AND COMPANY LP

Mailing Address
3900 WILLOW ST
STE 200

City	State	Zip Code
DALLAS	TX	75226

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
BOBBY NEAL BRIGHT, SR

Calendar Year-To-Date Per Election for Office Sought	1059422.59
---	------------

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	6		2	0	1	0

Amount

2475.00

Transaction ID: SE24-0.019756

Office Sought: House State: AL
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
SCOTT HOWELL AND COMPANY LP

Mailing Address
3900 WILLOW ST
STE 200

City	State	Zip Code
DALLAS	TX	75226

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
MARTHA ROBY

Calendar Year-To-Date Per Election for Office Sought	1059422.59
---	------------

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	6		2	0	1	0

Amount

2475.00

Transaction ID: SE24-0.019757

Office Sought: House State: AL
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	4950.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	2		2	0	1	0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
SCOTT HOWELL AND COMPANY LP

Mailing Address
3900 WILLOW ST
STE 200

City State Zip Code
DALLAS TX 75226

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
CHRISTOPHER P CARNEY

Calendar Year-To-Date Per Election for Office Sought 749907.30

Date
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Amount
17320.00

Transaction ID: SE24-0.019772

Office Sought: House State: PA
 Senate District: 10
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
SCOTT HOWELL AND COMPANY LP

Mailing Address
3900 WILLOW ST
STE 200

City State Zip Code
DALLAS TX 75226

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
WILLIAM OWENS

Calendar Year-To-Date Per Election for Office Sought 218531.98

Date
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Amount
18072.50

Transaction ID: SE24-0.019774

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	35392.50
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
SCOTT HOWELL AND COMPANY LP

Date
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Mailing Address
3900 WILLOW ST
STE 200

Amount
4000.00

City State Zip Code
DALLAS TX 75226

Transaction ID: SE24-0.019775

Purpose of Expenditure
MEDIA

Category/
Type

Office Sought: House State: NY
 Senate District: 23
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
WILLIAM OWENS

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 218531.98

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
ONMESSAGE INC

Date
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Mailing Address
2130 PRIEST BRIDGE DR # 11

Amount
18825.25

City State Zip Code
CROFTON MD 21114

Transaction ID: SE24-0.019764

Purpose of Expenditure
MEDIA

Category/
Type

Office Sought: House State: MS
 Senate District: 04
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
GENE TAYLOR

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 341817.09

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	22825.25
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
ONMESSAGE INC

Mailing Address
2130 PRIEST BRIDGE DR # 11

City CROFTON	State MD	Zip Code 21114
-----------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
A. B. CHANDLER, III

Calendar Year-To-Date Per Election for Office Sought	588764.28
---	-----------

Date

M	M
1	0

 /

D	D
2	6

 /

Y	Y	Y	Y
2	0	1	0

Amount

13900.00

Transaction ID: SE24-0.019771

Office Sought: House State: KY
 Senate District: 06
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
ONMESSAGE INC

Mailing Address
2130 PRIEST BRIDGE DR # 11

City CROFTON	State MD	Zip Code 21114
-----------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
WILLIAM OWENS

Calendar Year-To-Date Per Election for Office Sought	218531.98
---	-----------

Date

M	M
1	0

 /

D	D
2	6

 /

Y	Y	Y	Y
2	0	1	0

Amount

15000.00

Transaction ID: SE24-0.019773

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	28900.00
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date

M	M
1	2

 /

D	D
0	2

 /

Y	Y	Y	Y
2	0	1	0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
SRCP MEDIA

Mailing Address
201 N UNION ST.
SUITE 200

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
DENNIS HECK

Calendar Year-To-Date Per Election for Office Sought 1245269.79

Date
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Amount
18644.00

Transaction ID: SE24-0.019766

Office Sought: House State: WA
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
THE TARRANCE GROUP

Mailing Address
201 N UNION ST
STE 410

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
SURVEY RESEARCH

Name of Federal Candidate supported or Opposed by expenditure:
ANN KIRKPATRICK

Calendar Year-To-Date Per Election for Office Sought 1310874.40

Date
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Amount
5750.00

Transaction ID: SE24-0.019760

Office Sought: House State: AZ
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	24394.00
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
THE TARRANCE GROUP

Date
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Mailing Address
201 N UNION ST
STE 410

Amount
5750.00

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019761

Purpose of Expenditure
SURVEY RESEARCH

Category/
Type

Office Sought: House State: AZ
 Senate District: 01
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
PAUL ANTHONY GOSAR

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 1310874.40

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
ANTHEM MEDIA INC

Date
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Mailing Address
5524 BEE CAVES RD
STE B5

Amount
20063.00

City State Zip Code
AUSTIN TX 78746

Transaction ID: SE24-0.019763

Purpose of Expenditure
MEDIA

Category/
Type

Office Sought: House State: MS
 Senate District: 01
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
TRAVIS W CHILDERS

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 883315.28

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	25813.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
CRAFT MEDIA DIGITAL

Mailing Address
706 7TH ST SE

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
ANN KIRKPATRICK

Calendar Year-To-Date Per Election for Office Sought 1310874.40

Date
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Amount
9125.00

Transaction ID: SE24-0.019758

Office Sought: House State: AZ
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
CRAFT MEDIA DIGITAL

Mailing Address
706 7TH ST SE

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
PAUL ANTHONY GOSAR

Calendar Year-To-Date Per Election for Office Sought 1310874.40

Date
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Amount
9125.00

Transaction ID: SE24-0.019759

Office Sought: House State: AZ
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	18250.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
CRAFT MEDIA DIGITAL

Mailing Address
706 7TH ST SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
CHELLIE M PINGREE

Calendar Year-To-Date Per Election for Office Sought	15595.90
---	----------

Date

M M	/	D D	/	Y Y Y Y
1 0		2 6		2 0 1 0

Amount

6688.40

Transaction ID: SE24-0.019777

Office Sought: House State: ME
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
BASELICE AND ASSOCIATES INC

Mailing Address
4131 SPICEWOOD SPRINGS RD
STE O-2

City	State	Zip Code
AUSTIN	TX	78759

Purpose of Expenditure SURVEY RESEARCH	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
A. B. CHANDLER, III

Calendar Year-To-Date Per Election for Office Sought	588764.28
---	-----------

Date

M M	/	D D	/	Y Y Y Y
1 0		2 6		2 0 1 0

Amount

11500.00

Transaction ID: SE24-0.019770

Office Sought: House State: KY
 Senate District: 06
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	18188.40
(b) SUBTOTAL of Unitemized Independent Expenditures	[Empty Box]
(c) TOTAL Independent Expenditures	[Empty Box]

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date

M M	/	D D	/	Y Y Y Y
1 2		0 2		2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
GREENER AND HOOK LLC

Date
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Mailing Address
2101 WILSON BLVD
STE 402

Amount
15986.38

City State Zip Code
ARLINGTON VA 22201

Transaction ID: SE24-0.019765

Purpose of Expenditure Category/Type
MEDIA

Office Sought: House State: OH
 Senate District: 16
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
JOHN A BOCCIERI

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1262311.08

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
FABRIZIO MCLAUGHLIN AND ASSOCIATES INC

Date
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Mailing Address
915 KING ST
2ND FL

Amount
11500.00

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019767

Purpose of Expenditure Category/Type
SURVEY RESEARCH

Office Sought: House State: WI
 Senate District: 07
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
JULIE LASSA

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
852694.10

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	27486.38
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date
M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
FABRIZIO MCLAUGHLIN AND ASSOCIATES INC

Date
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Mailing Address
915 KING ST
2ND FL

Amount
11500.00

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019768

Purpose of Expenditure
SURVEY RESEARCH

Office Sought: House State: WI
 Senate District: 07
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
JULIE LASSA

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 852694.10

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
JAMESTOWN ASSOCIATES

Date
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Mailing Address
5 MAPLETON RD
STE 300

Amount
19500.00

City State Zip Code
PRINCETON NJ 08540

Transaction ID: SE24-0.019769

Purpose of Expenditure
MEDIA

Office Sought: House State: WI
 Senate District: 07
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
JULIE LASSA

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 852694.10

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	31000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
MH MEDIA LLC

Mailing Address
7801 NORFOLK AVENUE
SUITE T3

City State Zip Code
BETHESDA MD 20814

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
GARY J MCDOWELL

Calendar Year-To-Date Per Election for Office Sought
1084651.42

Date
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Amount
19544.25

Transaction ID: SE24-0.019762

Office Sought: House State: MI
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
DMM MEDIA LLC

Mailing Address
3299 K ST NW
SUITE 200

City State Zip Code
WASHINGTON DC 20007

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
COLLEEN WAKAKO HANABUSA

Calendar Year-To-Date Per Election for Office Sought
342030.85

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
4500.00

Transaction ID: SE24-0.019826

Office Sought: House State: HI
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	24044.25
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
HARRY E. MITCHELL

Calendar Year-To-Date Per Election for Office Sought 1145282.64

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
81827.10

Transaction ID: SE24-0.019799

Office Sought: House State: AZ
 Senate District: 05
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
BOBBY NEAL BRIGHT, SR

Calendar Year-To-Date Per Election for Office Sought 1059422.59

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
26419.91

Transaction ID: SE24-0.019798

Office Sought: House State: AL
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	108247.01
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Mailing Address
815 SLATERS LANE

Amount
26550.00

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019797

Purpose of Expenditure Category/Type
MEDIA

Office Sought: House State: WI
 Senate District: 08
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
STEVEN L KAGEN

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
410601.65

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Mailing Address
815 SLATERS LANE

Amount
8850.00

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019802

Purpose of Expenditure Category/Type
MEDIA

Office Sought: House State: AZ
 Senate District: 01
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
ANN KIRKPATRICK

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1310874.40

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	35400.00
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
PAUL ANTHONY GOSAR

Calendar Year-To-Date Per Election for Office Sought
1310874.40

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
8850.00

Transaction ID: SE24-0.019803

Office Sought: House State: AZ
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
SANFORD D BISHOP, JR

Calendar Year-To-Date Per Election for Office Sought
371153.39

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
93009.08

Transaction ID: SE24-0.019795

Office Sought: House State: GA
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	101859.08
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date
M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
PHILIP G HARE

Calendar Year-To-Date Per Election for Office Sought **896108.86**

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
97540.28

Transaction ID: SE24-0.019794

Office Sought: House State: IL
 Senate District: 17
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
COLLEEN WAKAKO HANABUSA

Calendar Year-To-Date Per Election for Office Sought **342030.85**

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
75230.31

Transaction ID: SE24-0.019793

Office Sought: House State: HI
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	172770.59
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Mailing Address
815 SLATERS LANE

Amount
39838.28

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019792

Purpose of Expenditure
MEDIA

Category/
Type

Office Sought: House State: KY
 Senate District: 06
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
A. B. CHANDLER, III

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 588764.28

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Mailing Address
815 SLATERS LANE

Amount
13275.00

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019791

Purpose of Expenditure
MEDIA

Category/
Type

Office Sought: House State: MA
 Senate District: 10
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
WILLIAM RICHARD KEATING

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 733820.18

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	53113.28
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Mailing Address
815 SLATERS LANE

Amount
19447.88

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019790

Purpose of Expenditure Category/Type
MEDIA

Office Sought: House State: MI
 Senate District: 07
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
MARK HAMILTON SCHAUER

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1468368.98

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Mailing Address
815 SLATERS LANE

Amount
70745.13

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019789

Purpose of Expenditure Category/Type
MEDIA

Office Sought: House State: MO
 Senate District: 04
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
IKE SKELTON

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1234362.16

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	90193.01
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Expenditure MEDIA		Category/ Type <input style="width:50px;" type="text"/>

Name of Federal Candidate supported or Opposed by expenditure:
GENE TAYLOR

Calendar Year-To-Date Per Election for Office Sought	341817.09
---	-----------

Date

M M	/	D D	/	Y Y Y Y
1 0		2 7		2 0 1 0

Amount

4348.89

Transaction ID: SE24-0.019788

Office Sought: House State: MS
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Expenditure MEDIA		Category/ Type <input style="width:50px;" type="text"/>

Name of Federal Candidate supported or Opposed by expenditure:
PHILIP G HARE

Calendar Year-To-Date Per Election for Office Sought	896108.86
---	-----------

Date

M M	/	D D	/	Y Y Y Y
1 0		2 7		2 0 1 0

Amount

4482.50

Transaction ID: SE24-0.019811

Office Sought: House State: IL
 Senate District: 17
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	8831.39
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis

 Signature

Date

M M	/	D D	/	Y Y Y Y
1 2		0 2		2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
MARK HAMILTON SCHAUER

Calendar Year-To-Date Per Election for Office Sought 1468368.98

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
4482.50

Transaction ID: SE24-0.019812

Office Sought: House State: MI
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
THE TARRANCE GROUP

Mailing Address
201 N UNION ST
STE 410

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
SURVEY RESEARCH

Name of Federal Candidate supported or Opposed by expenditure:
PHILIP G HARE

Calendar Year-To-Date Per Election for Office Sought 896108.86

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
11500.00

Transaction ID: SE24-0.019825

Office Sought: House State: IL
 Senate District: 17
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	15982.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
RISING TIDE MEDIA GROUP LLC

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Mailing Address
226 S FAYETTE

Amount
4561.00

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019829

Purpose of Expenditure
MEDIA

Category/
Type

Office Sought: House State: NM
 Senate District: 01
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
MARTIN HEINRICH

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 549013.27

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
AMERICAN MEDIA & ADVOCACY GROUP

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Mailing Address
815 SLATERS LANE, STE 200

Amount
44250.00

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019831

Purpose of Expenditure
MEDIA

Category/
Type

Office Sought: House State: NY
 Senate District: 01
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
TIMOTHY BISHOP

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 48409.00

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	48811.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
ONMESSAGE INC

Mailing Address
2130 PRIEST BRIDGE DR # 11

City CROFTON	State MD	Zip Code 21114
-----------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
PHILIP G HARE

Calendar Year-To-Date Per Election for Office Sought	896108.86
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
4754.50

Transaction ID: SE24-0.019824

Office Sought: House State: IL
 Senate District: 17
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
ONMESSAGE INC

Mailing Address
2130 PRIEST BRIDGE DR # 11

City CROFTON	State MD	Zip Code 21114
-----------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
RON KIND

Calendar Year-To-Date Per Election for Office Sought	182287.38
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
12200.00

Transaction ID: SE24-0.019827

Office Sought: House State: WI
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	16954.50
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
ONMESSAGE INC

Mailing Address
2130 PRIEST BRIDGE DR # 11

City State Zip Code
CROFTON MD 21114

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
RON KIND

Calendar Year-To-Date Per Election for Office Sought **182287.38**

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
15000.00

Transaction ID: SE24-0.019828

Office Sought: House State: WI
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
ONMESSAGE INC

Mailing Address
2130 PRIEST BRIDGE DR # 11

City State Zip Code
CROFTON MD 21114

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
ANN KIRKPATRICK

Calendar Year-To-Date Per Election for Office Sought **1310874.40**

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
4754.50

Transaction ID: SE24-0.019830

Office Sought: House State: AZ
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	19754.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
ONMESSAGE INC

Mailing Address
2130 PRIEST BRIDGE DR # 11

City State Zip Code
CROFTON MD 21114

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
KURT SCHRADER

Calendar Year-To-Date Per Election for Office Sought 746728.79

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
11500.00

Transaction ID: SE24-0.019832

Office Sought: House State: OR
 Senate District: 05
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
GENE TAYLOR

Calendar Year-To-Date Per Election for Office Sought 341817.09

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
4482.50

Transaction ID: SE24-0.019813

Office Sought: House State: MS
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	15982.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Mailing Address
815 SLATERS LANE

Amount
4482.50

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019814

Purpose of Expenditure Category/Type
MEDIA

Office Sought: House State: NM
 Senate District: 01
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
MARTIN HEINRICH

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
549013.27

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Mailing Address
815 SLATERS LANE

Amount
4482.50

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019816

Purpose of Expenditure Category/Type
MEDIA

Office Sought: House State: NY
 Senate District: 23
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
WILLIAM OWENS

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
218531.98

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	8965.00
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
MICHAEL A. ARCURI

Calendar Year-To-Date Per Election for Office Sought	438320.54
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
4482.50

Transaction ID: SE24-0.019817

Office Sought: House State: NY
 Senate District: 24
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
MARK CRITZ

Calendar Year-To-Date Per Election for Office Sought	545396.48
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
4482.50

Transaction ID: SE24-0.019821

Office Sought: House State: PA
 Senate District: 12
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	8965.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
GLENN CARLYLE NYE, III

Calendar Year-To-Date Per Election for Office Sought
424659.57

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
4482.50

Transaction ID: SE24-0.019822

Office Sought: House State: VA
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
RON KIND

Calendar Year-To-Date Per Election for Office Sought
182287.38

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
4482.50

Transaction ID: SE24-0.019815

Office Sought: House State: WI
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	8965.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date
M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
MIKE MCINTYRE

Calendar Year-To-Date Per Election for Office Sought 390403.02

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
4482.50

Transaction ID: SE24-0.019818

Office Sought: House State: NC
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
JOHN A BOCCIERI

Calendar Year-To-Date Per Election for Office Sought 1262311.08

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
4482.50

Transaction ID: SE24-0.019819

Office Sought: House State: OH
 Senate District: 16
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	8965.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
ZACHARY T SPACE

Calendar Year-To-Date Per Election for Office Sought	1124970.20
---	------------

Date

M M 1 0	D D 2 7	Y Y Y Y 2 0 1 0
------------	------------	--------------------

Amount

4482.50

Transaction ID: SE24-0.019820

Office Sought: House State: OH
 Senate District: 18
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
THOMAS STUART PRICE PERRIELLO

Calendar Year-To-Date Per Election for Office Sought	1006200.34
---	------------

Date

M M 1 0	D D 2 7	Y Y Y Y 2 0 1 0
------------	------------	--------------------

Amount

4482.50

Transaction ID: SE24-0.019823

Office Sought: House State: VA
 Senate District: 05
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	8965.00
(b) SUBTOTAL of Unitemized Independent Expenditures	<input style="width:100%;" type="text"/>
(c) TOTAL Independent Expenditures	<input style="width:100%;" type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date

M M 1 2	D D 0 2	Y Y Y Y 2 0 1 0
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SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
MICHAEL A. ARCURI

Calendar Year-To-Date Per Election for Office Sought 438320.54

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
132750.00

Transaction ID: SE24-0.019787

Office Sought: House State: NY
 Senate District: 24
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
MARTIN HEINRICH

Calendar Year-To-Date Per Election for Office Sought 549013.27

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
22125.00

Transaction ID: SE24-0.019786

Office Sought: House State: NM
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	154875.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
CHARLES A WILSON

Calendar Year-To-Date Per Election for Office Sought 337615.55

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
5310.00

Transaction ID: SE24-0.019785

Office Sought: House State: OH
 Senate District: 06
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
RON KIND

Calendar Year-To-Date Per Election for Office Sought 182287.38

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
150604.88

Transaction ID: SE24-0.019784

Office Sought: House State: WI
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	155914.88
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
KURT SCHRADER

Calendar Year-To-Date Per Election for Office Sought **746728.79**

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
9115.50

Transaction ID: SE24-0.019783

Office Sought: House State: OR
 Senate District: 05
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
THOMAS STUART PRICE PERRIELLO

Calendar Year-To-Date Per Election for Office Sought **1006200.34**

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
177000.00

Transaction ID: SE24-0.019782

Office Sought: House State: VA
 Senate District: 05
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	186115.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
FREDERICK C BOUCHER

Calendar Year-To-Date Per Election for Office Sought 814117.53

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
13323.68

Transaction ID: SE24-0.019781

Office Sought: House State: VA
 Senate District: 09
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
JULIE LASSA

Calendar Year-To-Date Per Election for Office Sought 852694.10

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
52878.75

Transaction ID: SE24-0.019780

Office Sought: House State: WI
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	66202.43
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
BOBBY NEAL BRIGHT, SR

Calendar Year-To-Date Per Election for Office Sought
1059422.59

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
4532.50

Transaction ID: SE24-0.019806

Office Sought: House State: AL
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
ANN KIRKPATRICK

Calendar Year-To-Date Per Election for Office Sought
1310874.40

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
4482.50

Transaction ID: SE24-0.019807

Office Sought: House State: AZ
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	9015.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
JOHN TONY SALAZAR

Calendar Year-To-Date Per Election for Office Sought	763073.31
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
4482.50

Transaction ID: SE24-0.019808

Office Sought: House State: CO
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address
815 SLATERS LANE

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

Purpose of Expenditure MEDIA	Category/ Type
---------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
COLLEEN WAKAKO HANABUSA

Calendar Year-To-Date Per Election for Office Sought	342030.85
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
8957.50

Transaction ID: SE24-0.019809

Office Sought: House State: HI
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	13440.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Mailing Address
815 SLATERS LANE

Amount
8957.50

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019810

Purpose of Expenditure Category/Type
MEDIA

Office Sought: House State: MA
 Senate District: 10
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
WILLIAM RICHARD KEATING

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
733820.18

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Date
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Mailing Address
815 SLATERS LANE

Amount
38439.08

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID: SE24-0.019907

Purpose of Expenditure Category/Type
MEDIA

Office Sought: House State: ID
 Senate District: 01
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
WALTER CLIFFORD MINNICK

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
48139.08

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	47396.58
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
NMB RESEARCH LLC

Date
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Mailing Address
214 N FAYETTE ST

Amount
10500.00
Transaction ID: SE24-0.019910

City State Zip Code
ALEXANDRIA VA 22314

Office Sought: House State: MA
 Senate District: 10
 Presidential

Purpose of Expenditure
SURVEY RESEARCH

Category/
Type

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
WILLIAM RICHARD KEATING

Disbursement For: Primary General
 Other (specify) : _____
2010

Calendar Year-To-Date Per Election
for Office Sought 733820.18

Full Name (Last, First, Middle, Initial) of Payee
ONMESSAGE INC

Date
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Mailing Address
2130 PRIEST BRIDGE DR # 11

Amount
9700.00
Transaction ID: SE24-0.019908

City State Zip Code
CROFTON MD 21114

Office Sought: House State: ID
 Senate District: 01
 Presidential

Purpose of Expenditure
MEDIA

Category/
Type

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
WALTER CLIFFORD MINNICK

Disbursement For: Primary General
 Other (specify) : _____
2010

Calendar Year-To-Date Per Election
for Office Sought 48139.08

(a) SUBTOTAL of Itemized Independent Expenditures	20200.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
ONMESSAGE INC

Mailing Address
2130 PRIEST BRIDGE DR # 11

City State Zip Code
CROFTON MD 21114

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
WILLIAM RICHARD KEATING

Calendar Year-To-Date Per Election for Office Sought **733820.18**

Date
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Amount
4300.00

Transaction ID: SE24-0.019911

Office Sought: House State: MA
 Senate District: 10
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
SRCP MEDIA

Mailing Address
201 N UNION ST.
SUITE 200

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type
MEDIA

Name of Federal Candidate supported or Opposed by expenditure:
TIMOTHY BISHOP

Calendar Year-To-Date Per Election for Office Sought **48409.00**

Date
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Amount
4159.00

Transaction ID: SE24-0.019909

Office Sought: House State: NY
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	8459.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER C C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
CRAFT MEDIA DIGITAL

Mailing Address
706 7TH ST SE

City WASHINGTON	State DC	Zip Code 20003
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Purpose of Expenditure MEDIA	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
ANN KIRKPATRICK

Calendar Year-To-Date Per Election for Office Sought	1310874.40
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Date

M M 1 1	D D 0 4	Y Y Y Y 2 0 1 0
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Amount

-16300.00

Transaction ID: SE24-0.016221

Office Sought: House State: AZ
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
CRAFT MEDIA DIGITAL

Mailing Address
706 7TH ST SE

City WASHINGTON	State DC	Zip Code 20003
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Purpose of Expenditure MEDIA	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
ANN KIRKPATRICK

Calendar Year-To-Date Per Election for Office Sought	1310874.40
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Date

M M 1 1	D D 0 4	Y Y Y Y 2 0 1 0
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Amount

16300.00

Transaction ID: SE24-0.018904

Office Sought: House State: AZ
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	23781647.45

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A Davis
Signature

Date

M M 1 2	D D 0 2	Y Y Y Y 2 0 1 0
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SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE
If YES, name the designating committee: REPUBLICAN NATIONAL COMMITTEE	
Mailing Address 320 1ST ST SE	
City WASHINGTON	State DC ZIP Code 20003

Full Name (Last, First, Middle Initial) of Each Payee REVOLUTION MEDIA GROUP		Purpose of Expenditure MEDIA	<input type="text"/> Category/Type
Mailing Address 1090 VERMONT AVE NW STE 1230		Date M M / D D / Y Y Y Y 10 / 18 / 2010	
City WASHINGTON	State DC	ZIP Code 20005	Amount 84000.00
Name of Federal Candidate Supported SAM CALIGUIRI	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: <u>CT</u> District: <u>05</u>	Transaction ID: SF25-0.016563
Aggregate General Election Expenditure for this Candidate ▶		84000.00	

Full Name (Last, First, Middle Initial) of Each Payee MCLAUGHLIN AND ASSOCIATES INC		Purpose of Expenditure MEDIA	<input type="text"/> Category/Type
Mailing Address 566 S RT 303		Date M M / D D / Y Y Y Y 10 / 18 / 2010	
City BLAUVELT	State NY	ZIP Code 10913	Amount 84895.00
Name of Federal Candidate Supported JON RUNYAN	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: <u>NJ</u> District: <u>03</u>	Transaction ID: SF25-0.016564
Aggregate General Election Expenditure for this Candidate ▶		84895.00	

Full Name (Last, First, Middle Initial) of Each Payee WF OF R MEDIA		Purpose of Expenditure MEDIA	<input type="text"/> Category/Type
Mailing Address 411 BRANCHWAY RD		Date M M / D D / Y Y Y Y 10 / 18 / 2010	
City RICHMOND	State VA	ZIP Code 23236	Amount 83500.00
Name of Federal Candidate Supported ILARIO GREGORY PANTANO	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: <u>NC</u> District: <u>07</u>	Transaction ID: SF25-0.016566
Aggregate General Election Expenditure for this Candidate ▶		83500.00	

SUBTOTAL of Expenditures This Page (optional)	252395.00
TOTAL This Period (last page this line number only)	

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE
If YES, name the designating committee: REPUBLICAN NATIONAL COMMITTEE	
Mailing Address 320 1ST ST SE	
City WASHINGTON	State DC ZIP Code 20003

Full Name (Last, First, Middle Initial) of Each Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Purpose of Expenditure MEDIA	<input type="text"/> Category/Type
Mailing Address 815 SLATERS LANE		Date MM / DD / YYYY 10 / 19 / 2010	
City ALEXANDRIA	State VA	ZIP Code 22314	Amount 79050.00
Name of Federal Candidate Supported RANDOLPH ALTSCHULER	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 01	Transaction ID: SF25-0.016594
Aggregate General Election Expenditure for this Candidate ▶		79050.00	

Full Name (Last, First, Middle Initial) of Each Payee MCNALLY TEMPLE AND ASSOCIATES INC		Purpose of Expenditure MEDIA	<input type="text"/> Category/Type
Mailing Address 1817 CAPITOL AVE		Date MM / DD / YYYY 10 / 19 / 2010	
City SACRAMENTO	State CA	ZIP Code 95811	Amount 84995.00
Name of Federal Candidate Supported DAVID JEFFREY HARMER	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: CA District: 11	Transaction ID: SF25-0.016595
Aggregate General Election Expenditure for this Candidate ▶		84995.00	

Full Name (Last, First, Middle Initial) of Each Payee GREENER AND HOOK LLC		Purpose of Expenditure MEDIA	<input type="text"/> Category/Type
Mailing Address 2101 WILSON BLVD STE 402		Date MM / DD / YYYY 10 / 19 / 2010	
City ARLINGTON	State VA	ZIP Code 22201	Amount 85000.00
Name of Federal Candidate Supported MATT DOHENY	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 23	Transaction ID: SF25-0.016596
Aggregate General Election Expenditure for this Candidate ▶		85000.00	

SUBTOTAL of Expenditures This Page (optional)	249045.00
TOTAL This Period (last page this line number only)	

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE
If YES, name the designating committee: REPUBLICAN NATIONAL COMMITTEE	
Mailing Address 320 1ST ST SE	
City WASHINGTON	State DC ZIP Code 20003

Full Name (Last, First, Middle Initial) of Each Payee ONMESSAGE INC		Purpose of Expenditure MEDIA	<input type="text"/> Category/Type
Mailing Address 2130 PRIEST BRIDGE DR # 11		Date MM / DD / YYYY 10 / 19 / 2010	
City CROFTON	State MD	ZIP Code 21114	Amount 85000.00
Name of Federal Candidate Supported JAMES B RENACCI	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: <u>OH</u> District: <u>16</u>	Transaction ID: SF25-0.016597
Aggregate General Election Expenditure for this Candidate ▶		85000.00	

Full Name (Last, First, Middle Initial) of Each Payee GREENER AND HOOK LLC		Purpose of Expenditure MEDIA	<input type="text"/> Category/Type
Mailing Address 2101 WILSON BLVD STE 402		Date MM / DD / YYYY 10 / 21 / 2010	
City ARLINGTON	State VA	ZIP Code 22201	Amount 85000.00
Name of Federal Candidate Supported MICHAEL GRIMM	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: <u>NY</u> District: <u>13</u>	Transaction ID: SF25-0.016612
Aggregate General Election Expenditure for this Candidate ▶		85000.00	

Full Name (Last, First, Middle Initial) of Each Payee THE VICTORY GROUP INC		Purpose of Expenditure MEDIA	<input type="text"/> Category/Type
Mailing Address 1220 HILLSHIRE RD		Date MM / DD / YYYY 10 / 21 / 2010	
City BALTIMORE	State MD	ZIP Code 21222	Amount 85000.00
Name of Federal Candidate Supported DAVID RIVERA	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: <u>FL</u> District: <u>25</u>	Transaction ID: SF25-0.016613
Aggregate General Election Expenditure for this Candidate ▶		85000.00	

SUBTOTAL of Expenditures This Page (optional) ▶	255000.00
TOTAL This Period (last page this line number only) ▶	<input type="text"/>

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE
If YES, name the designating committee: REPUBLICAN NATIONAL COMMITTEE	
Mailing Address 320 1ST ST SE	
City WASHINGTON	State DC ZIP Code 20003

Full Name (Last, First, Middle Initial) of Each Payee CROCKER CONSULTING		Purpose of Expenditure MEDIA	<input type="text"/> Category/Type
Mailing Address 50 BIRCHILL RD		Date M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 1 0	
City CENTERVILLE	State MA	ZIP Code 02632	Amount 50094.75
Name of Federal Candidate Supported JEFFREY DAVIS PERRY	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: MA District: 10	Transaction ID: SF25-0.016644
Aggregate General Election Expenditure for this Candidate ▶		50094.75	

Full Name (Last, First, Middle Initial) of Each Payee STRATEGIC MEDIA PLACEMENT		Purpose of Expenditure MEDIA	<input type="text"/> Category/Type
Mailing Address 7669 STAGERS LOOP		Date M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0	
City DELAWARE	State OH	ZIP Code 43015	Amount 73000.00
Name of Federal Candidate Supported JOE HECK	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NV District: 03	Transaction ID: SF25-0.016679
Aggregate General Election Expenditure for this Candidate ▶		73000.00	

Full Name (Last, First, Middle Initial) of Each Payee STRATEGIC MEDIA PLACEMENT		Purpose of Expenditure MEDIA	<input type="text"/> Category/Type
Mailing Address 7669 STAGERS LOOP		Date M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0	
City DELAWARE	State OH	ZIP Code 43015	Amount 85000.00
Name of Federal Candidate Supported MICHAEL G FITZPATRICK	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: PA District: 08	Transaction ID: SF25-0.016680
Aggregate General Election Expenditure for this Candidate ▶		85000.00	

SUBTOTAL of Expenditures This Page (optional) ▶	208094.75
TOTAL This Period (last page this line number only) ▶	<input type="text"/>

